

The development, transmission and enactment of policy messages in complex adaptive educational systems

Exploring schools' implementation and pupil experiences of mental health and wellbeing interventions in Welsh primary schools

Stephen John Jennings

This thesis is submitted in fulfilment of the degree of Doctor of Philosophy (Ph.D.) in Social Sciences

School of Social Sciences, Cardiff University
2021

Summary

Primary schools are increasingly regarded as appropriate settings for intervening in the mental health and wellbeing (MHWB) of pupils, facing pressures from across educational systems to deliver effective provision. However, evaluations reveal that where some school-based MHWB interventions achieve their intended outcomes, many still produce neutral to small effects, and in some cases, unintended and negative effects. Limitations arguably reflect inadequate attention to school context and the lack of co-production in intervention development. Researchers suggest increasing focus on systemic and school contexts will facilitate improved understanding of how the implementation of interventions can be effective and sustained over time. This thesis adopted a systems-wide perspective on school-based MHWB interventions by exploring the origin of policy messages, how they are developed and transmitted from key stakeholders, subsequently enacted by school staff and experienced by pupils. The thesis utilised a case study at the national level, delineated into regional, community and school cases. Interviews were conducted with key stakeholders from across all levels of provision.

Findings propose conceptual confusion exists regarding policy messages developed by policy, regional and community stakeholders. Tensions are evident in intervention strategy and assessment, leading to policy hyperactivity in the development of messages and subsequent transmission to schools. Schools self-organise, and develop contextually-relevant intervention practices, orienting toward strategy messages preferred by 'school collaborators', notably mid-level policy actors with frequent contact with schools, who foreground the importance of socio-environmental factors over behavioural strategies. Pupils experience MHWB interventions more positively when developed in accordance with school collaborators' strategies, with most rejecting interventions with behavioural foundations. Future policy should be co-produced in collaboration with stakeholders across all levels of provision in educational supra-systems, particularly school collaborators, staff and pupils, and should reflect inter-school contextual variation. Co-produced, contextually-relevant policies are more likely to provide schools with clearer guidance to enact MHWB policy messages and implement interventions acceptable to staff and pupils.

Acknowledgements

First and foremost I would like to thank my partner, Anna. You have been kind, inspiring, compassionate (and very patient!) at all stages of writing this thesis. I am incredibly grateful to you. I would also like to thank all of my family and friends for their support and encouragement throughout the thesis journey. Special thanks go to Elen De Lacy, Luke Midgley, Jordan Van Godwin, Em Lowthian and Mia Mace.

Thanks also to my supervisors, Dr. Rhiannon Evans and Prof. Simon Murphy, and my progress reviewer, Dr. Dawn Mannay, for your guidance and feedback, which has been instrumental in my development as a qualitative researcher. Thanks to my colleagues at the School of Healthcare Sciences at Cardiff University, as well as everyone at the TLHP team at the University of Bristol. Finally, thank you to all of the study participants who kindly gave their time to this research.

Many thanks to Health and Care Research Wales for funding this thesis. This work was also undertaken with the support of the Centre for the Development and Evaluation of Complex Interventions for Public Health Improvement (DECIPHer), a UKCRC Public Health Research Centre of Excellence. Joint funding (MR/KO232331/1) from the British Heart Foundation, Cancer Research UK, Economic and Social Research Council, Medical Research Council, Welsh Government and the Wellcome Trust, under the auspices of the UK Clinical Research Collaboration, is gratefully acknowledged.

For my dad, Nick, and my son, Asher.

Abbreviations

ACEs	Adverse Childhood Experiences
AET	Affective events theory
ALNCO	Alternative Learning Needs Coordinator
CAMHS	Child and Adolescent Mental Health Services
CICI	Context and Implementation of Complex Interventions Framework (Pfadenhauer et al., 2017)
CFIR	Consolidated Framework for Implementation Research (Damschroder et al., 2009)
C-M-O	Context-Mechanism-Outcome
CSW	Central South Wales Educational Consortia
EC	Educational consortia
ELSA	Emotional Literacy Support Assistant
ES	Effect size
EWB	Emotional wellbeing
EU	European Union
FSM	Free school meals
GDPR	General Data Protection Regulation (2016/679)
HPS	Holloway primary school
INT	Interviewer
KS2	Key Stage 2
LA	Local authority
LSA	Learning Support Assistant
MHWB	Mental health and wellbeing
MRC	Medical Research Council
NIHR	National Institute of Health Research
NPT	Normalisation Process Theory
OFSTED	Office for Standards in Education, Children's Services and Skills
PATHS	Promoting Alternative Thinking Strategies
PRC	Policy, regional and community level (of supra-system)
RCT	Randomised controlled trial
RPS	Rangers primary school
RQ	Research question
SEM	Socio-ecological Model (McLeroy et al., 1988)
SEAL	Social and Emotional Aspects of Learning
SEL	Social and emotional learning
SES	Socio-economic status
SLT	Senior leadership teams
UK	United Kingdom
US	United States
WHO	World Health Organisation

Table of Contents

Chapter 1: Introduction	1
1.1. Background	1
1.2. Overview of thesis chapters	3
Chapter 2: The development and implementation of mental health and wellbeing policy in primary schools	8
2.1. Introduction	8
2.2. The UK and Welsh policy context	9
2.2.1. Origins of policy	9
2.2.2. Why are primary schools considered relevant settings for MHWB provision?	10
2.2.3. Welsh education policy	11
2.2.4. How have schools implemented policy?	13
2.3. Mixed effectiveness of school-based MHWB interventions	15
2.3.1. Positive outcomes in key domains	16
2.3.2. Limitations	20
2.3.2.1. Small and neutral effects	21
2.3.2.2. Unintended and negative effects	23
2.3.2.3. Evaluation quality	25
2.3.2.4. Sustainability	27
2.3.2.5. Context: poor transferability, acceptability and co-production processes	31
2.4. Tensions in locating responsibility	39
2.5. Conclusion	41
Chapter 3: Understanding context in complex adaptive educational systems	44
3.1. Introduction	44
3.2. Understanding and researching context	45
3.2.1. Realist evaluation and complex adaptive systems	45
3.2.2. Primary schools as complex adaptive systems	48
3.2.3. Key features of context	50
3.2.4. Frameworks for understanding context	54
3.2.5. When should context be researched?	62
3.3. Conceptual framework	65
3.3.1. Combined framework for exploring system emergence	65
3.3.1.1. Interdependencies	67
3.3.1.2. Sensemaking	68
3.3.1.3. Self-organisation	69
3.3.2. Development, transmission, enactment and experience of policy messages	70
3.3.2.1. Development and transmission: exploring the outer setting of complex adaptive systems	71
3.3.2.2. Enactment: exploring the inner setting of schools' intervention practices	75

3.3.2.3.	Pupils' experiences of schools' intervention practices	82
3.4.	Conclusion and research questions	84
Chapter 4: Research Design		87
4.1.	Introduction	87
4.2.	Ontology and epistemology: Critical realism	87
4.3.	Methodology	90
4.3.1.	Why the case study?	90
4.3.2.	Instrumental approach	91
4.3.3.	Limitations of the case study	92
4.4.	Sampling frame: Defining the supra-system case	92
4.4.1.	Public policy (national) case: Welsh education system	92
4.4.2.	Regional case: Educational Consortia	94
4.4.3.	Community cases: Local Authorities	95
4.4.4.	School cases	96
4.5.	Sampling and recruitment	96
4.5.1.	Public policy, regional and community level	96
4.5.1.1.	Sampling	96
4.5.1.2.	Recruitment	99
4.5.1.3.	Sample characteristics	104
4.5.2.	Schools	105
4.5.2.1.	Sampling	105
4.5.2.2.	Recruitment	107
4.5.2.3.	Sample characteristics: Rangers and Holloway schools	107
4.5.3.	School staff	109
4.5.3.1.	Sampling	109
4.5.3.2.	Recruitment	109
4.5.3.3.	Sample characteristics	109
4.5.4.	Pupils	110
4.5.4.1.	Sampling	110
4.5.4.2.	Recruitment	111
4.5.4.3.	Sample characteristics	111
4.6.	Method	113
4.6.1.	Qualitative, semi-structured interviews	113
4.6.2.	Interviews with policy, regional, community and school participants	114
4.6.3.	Paired interviews with pupils	115
4.6.4.	Appraising interview data	118
4.6.4.1.	Interviews with policy, regional, community and school participants	118
4.6.4.2.	Pupil interviews	121
4.6.5.	Variations on the interview	123
4.6.6.	Overview of data collection	124
4.7.	Ethics	125
4.7.1.	Informed consent	126
4.7.1.1.	Policy, regional and community participants	126
4.7.1.2.	School staff	127
4.7.1.3.	Parents	127

4.7.1.4. Pupils	128
4.7.2. Confidentiality and anonymity	128
4.7.3. Data processing and storage	128
4.7.4. Minimising risk of harm	129
4.8. Analysis	129
4.9. Reflexivity	134
4.10. Conclusion	136
Chapter 5: Examining policy, regional and community stakeholder practices: Hyperactivity in the development and transmission of school-based mental health and wellbeing policy messages	138
5.1. Introduction	138
5.2. Theoretical approach	139
5.3. Justifications for school-based MHWB intervention	140
5.4. Obligatory choice: Moral, legal and ethical pressures on school	143
5.5. Conceptual confusion and conflict: developing weakly-classified policy messages	147
5.5.1. Policy and regional stakeholders' agendas: centralising character education	148
5.5.2. School collaborators' responses to 'fixing' individuals	149
5.6. School collaborators' accounts of problematic inter-agency working	152
5.6.1. Barriers to collaboration	153
5.6.2. ' <i>Attendance, attendance, attendance</i> '	155
5.7. Conceptual confusion creates policy hyperactivity	160
5.8. Transmitting hyperactive policy messages at the community-school Interface	163
5.9. Conclusion	166
Chapter 6: Coping with hyperactivity: Schools' enactment of policy messages and effects on the implementation of interventions	168
6.1. Introduction	168
6.2. Theoretical approach	169
6.3. Acceptance and rejection of hyperactive policy messages	171
6.3.1. Clear acceptance of messages	171
6.3.2. Duality of acceptance and rejection of messages	175
6.4. Dabbling and trialling: searching for contextual relevance	181
6.5. Recontextualisation of policy messages	185
6.5.1. Utilising the unique positionality of key staff	186
6.5.2. De-formalising emotional spaces for better staff-pupil relationships	189
6.5.3. Resisting the messages of fixing individuals	194
6.6. Conclusion	200

Chapter 7: Liminal emotional spaces: Pupils' experiences of schools' MHWB interventions	203
7.1. Introduction	203
7.2. Theoretical approach	204
7.3. Re-imagining emotional spaces	205
7.3.1. De-formalising and de-stigmatising spaces	206
7.3.2. The effect of key intervention agents: Clara and Daniel	217
7.3.3. Taking ownership of emotional spaces	220
7.4. Unclear separation of rules, values and relations: barriers to effectiveness?	224
7.5. Conclusion	228
Chapter 8: Discussion	231
8.1. Introduction	231
8.2. Situating the thesis	232
8.3. Contributions of the thesis	234
8.3.1. Origin of policy messages: Exploring stakeholders' key justifications for school-based MHWB provision	234
8.3.2. Development and transmission: Establishing the relationship between conceptual confusion and weak systemic interdependencies	236
8.3.3. The practical effects of policy hyperactivity: Schools' search for contextually-relevant interventions	239
8.3.4. Exploring pupils' experiences of schools' intervention practices and identifying leverage points and barriers to experience and engagement	245
8.3.5. Developing a systems-wide perspective on intervention development and implementation in complex adaptive educational systems	250
8.4. Reflections on the study design	251
8.5. Reflections on school-based MHWB provision in Wales	258
8.6. Key recommendations for policy, research and practice in complex adaptive educational systems	259
8.7. Conclusion	264
Appendices	266
Appendix A: Policy, regional and community stakeholder information sheets and consent forms	266
Appendix B: School staff information sheets and consent forms	269
Appendix C: Parental opt-in forms (Rangers primary)	272
Appendix D: Parental opt-out forms (Holloway primary)	275
Appendix E: Pupil information sheets, assent and interview evaluation forms (Holloway and Rangers)	278
Appendix F: Ethical approval form	283
Appendix G: Interview schedules	284
Appendix H: Coding tree	293
Appendix I: Examples of interactive interview activities: brain mapping and	

circle ranking	295
Appendix J: Examples of literature review searches	299
Appendix K: Transcription key	299
Bibliography	300

List of Tables and Figures

Tables

Table 1:	Overview of Keshavarz et al.'s (2010) findings documenting key complex adaptive system properties of primary schools	48
Table 2:	Overview of key domains of the Consolidated Framework for Implementation Research (Damschroder et al., 2009)	57
Table 3:	Adaptation of May et al.'s (2016) development of Normalisation Process Theory	59
Table 4:	Adaptation of key elements of O'Cathain et al.'s (2019) 'framework of actions for intervention development' (from the INDEX study)	63
Table 5:	Combined framework for exploring system emergence (interdependencies)	68
Table 6:	Combined framework for exploring system emergence (sensemaking)	69
Table 7:	Combined framework for exploring system emergence (self-organisation)	70
Table 8:	Presentation of study research questions and areas for contextual inquiry from conceptual framework	85
Table 9:	Defining the supra-system case: Using the socio-ecological model to identify potential groups, organisations and participants	94
Table 10:	Breakdown of national, regional and community groupings by FSM% and population density variables	95
Table 11:	Policy, regional and community stakeholder sample characteristics	104
Table 12:	School sample characteristics, including variable information for FSM%, school size and urban/rural classification, based on population density	108
Table 13:	School staff sample characteristics	109
Table 14:	School pupil sample characteristics	111
Table 15:	Interviews conducted across each level of supra-system case study, detailing number of interviews, participants, mean and total length of interview	125
Table 16:	Thesis application of Braun and Clarke's (2006) six-step approach to thematic analysis, with examples of each stage	132
Table 17:	Application of each dataset to the three empirical chapters	137

Figures

Figure 1:	Different approaches to spread and scale-up in innovation and improvement (Greenhalgh and Papousti, 2019)	53
Figure 2:	McLeroy et al.'s (1988) socio-ecological model	55
Figure 3:	Daivadanam et al.'s (2019) 'multi-layered contextual framework', inspired by Taplin et al. (2012)	56
Figure 4:	The Context and Implementation of Complex Interventions Framework (Pfadenhauer et al., 2017)	61

Figure 5:	The four key stages of developing and evaluating complex interventions as outlined in the MRC guidance (Craig et al., 2008)	62
Figure 6:	Diagrammatic representation of the primary case, secondary and sub cases	93
Figure 7:	Sampling network for policy, regional and community stakeholders, documenting chain-referral and purposive sampling processes	103

Chapter 1: Introduction

This chapter provides the background and rationale for the thesis, an overview of thesis chapters and summarises key findings from the data.

1.1. Background

Primary schools are increasingly regarded as appropriate settings for intervening in the mental health and wellbeing (MHWB) of pupils. Many of these expectations have arisen from the reported prevalence of mental health conditions, which affect as many as 10-20% of children (Green et al., 2004; Humphrey and Wigelsworth, 2016), with the median onset of many conditions including generalised anxiety at the primary-secondary educational transition (Collishaw et al., 2004; Kessler et al., 2005; Maughan et al., 2005). Latest prevalence statistics from the UK document one in eight (12.8%) of five to 19 year olds had at least one mental health condition in 2017 (NHS Digital, 2018). Furthermore, just under 13% of children and young people between 5-19 years old currently meet clinical level criteria for mental health conditions (Sadler et al., 2018). Ensuring effective MHWB provision is delivered in primary schools is therefore a core priority, though a difficult one to realise, with the existing evidence base mixed in terms of programme effectiveness and sustainability of positive effect sizes.

Schools face key challenges delivering effective MHWB provision in an increasingly overcrowded curriculum, leading to daily practical challenges scheduling time for provision and selecting and implementing relevant interventions from a substantial and ever-growing evidence base. Schools face increasing legal, moral and ethical pressures from across educational supra-systems to deliver effective MHWB. Pressures originating from key policymakers and organisations across these supra-systems are being conveyed and communicated to schools by various forms of policy messages.

Shifts in problematising and identifying key leverage points for, and barriers to, effective primary school-based MHWB interventions are considered necessary, due to an extant evidence base of mixed effectiveness and a lack of long-term

sustainability, where many programmes document initially positive effect sizes which are frequently un-sustained. The literature highlights various problems, including, but not limited to: poor effect sizes of programme outcomes, weak contextual fit due to adaptation problems often reflecting the importance of cultural and contextual differences across countries (e.g. Nilsson et al., 2019), and the negative effects of MHWB programmes. These factors contribute to an unclear evidence base for long-term sustainability.

Ultimately, current considerations in developing and evaluating school-based MHWB programmes insufficiently focus on the context of schools and wider systems in which interventions are delivered, and shifts in how researchers consider the effectiveness and sustainability of these programmes are required. Moreover, existing studies have overwhelmingly explored and measured the effectiveness of individual interventions, with limited reference to the wider policy context that schools operate within. It is theorised that this lens could facilitate more systems-level perspectives on MHWB programme effectiveness and sustainability. To date, no studies have explored the origin of MHWB policy messages, how they are developed and transmitted from key stakeholders in educational supra-systems, enacted by school staff and experienced by pupils.

Theoretical shifts in public health, particularly within the complex adaptive systems literature, suggest research should focus less on developing and evaluating discrete packages of components (Moore and Evans, 2017), and instead on examining the context of systems in which programmes are situated (Hawe et al., 2009). Many public health researchers are changing focus: interventions are no longer considered as discrete from their context, rather their power to achieve outcomes in pupil MHWB arise from their interaction with and disruption of complex adaptive systems including educational systems (Moore and Evans, 2017).

It is consequently necessary to adopt a systems-level perspective on school-based MHWB, where interventions are considered 'events' in systems (Hawe et al., 2009). Therefore, rather than focusing on specific, discrete MHWB interventions, this study theorises the context of an educational case study supra-system, where a multitude of MHWB interventions are implemented. Viewing the supra-system as a system

housing many different interventions, or 'events' within the system, enables a theorisation of the key leverage points and barriers to effective intervention implementation and sustainability from a systems-wide perspective.

Where much of the previous literature has either focused on a specific intervention, evaluating its effectiveness (and sometimes its process), this thesis directs attention towards the collective of MHWB interventions arising from schools' enactment of policy messages, exploring the development, transmission, enactment and experience of MHWB policy messages. A policy messages perspective can be fused with educational theories such as policy enactments (Ball et al., 2011; Braun et al., 2011) and Bernstein's (2000) transmission context, to explore how MHWB messages are first developed at the policy level, how they are then transmitted from policymakers to schools, and enacted as specific intervention practices at the school level. This lens can also be used to explore how school pupils engage with and experience MHWB interventions.

1.2. Overview of thesis chapters

Chapter 2 focuses on the key policy context in the UK and Wales, and schools' implementation of MHWB interventions resultant from this policy context. The chapter opens by considering the origins of policy, before exploring why primary schools in particular are considered relevant settings for delivering MHWB provision¹. Subsequently, it focuses on the Welsh educational context, where education is devolved from central UK government (Donaldson, 2015). The second half of the chapter documents increased emphasis on MHWB provision to address epidemiological concerns, providing a synthesis of the literature. It surveys UK and global literature, drawing a number of conclusions from the evidence base, including systematic reviews, meta-analyses and individual intervention evaluations, as to why many interventions have produced mixed effectiveness, with implementation, contextual fit and sustainability often key barriers. Penultimately, the chapter will outline the tensions in locating responsibility with schools. Chapter 2 concludes that

¹ Provision is used to denote a range of interventions.

understanding the context of educational systems and how these systems interact with MHWB interventions is critical.

Chapter 3 will provide the background to understanding and researching context, founding this in the perspectives of realist evaluation (Pawson and Tilley, 1997) and complex adaptive systems theories, where a systems lens is predicated on context as inseparable from the system itself. It forwards how primary schools are increasingly conceptualised as complex adaptive systems (Keshavarz et al., 2010). The key features of context are identified and a range of frameworks for researching context are critically appraised. The conceptual framework for the thesis is presented in the second half of the chapter. This framework is comprised of central elements of frameworks appraised, and orientates towards a key property of complex adaptive systems, emergence. Emergence is considered a vital area for adopting a systems-wide perspective on school-based MHWB provision. How this lens complements the aims of the thesis is illustrated in the final section, and a link to the study research questions is made with justification for their development.

Chapter 4 introduces the research design. It firstly justifies the use of the ontological and epistemological position of critical realism, before providing a background and definition of the instrumental case study. It defines the 'supra-system' (Keshavarz et al., 2010) case and outlines the national, regional, community and school cases that comprise this system (sample frame). It then details how participants from these cases were sampled and recruited, before presenting the sample characteristics for each case. The qualitative method is introduced, rationalised and justified. Ethical processes and considerations, including informed consent, confidentiality and anonymity, data processing and storage, and minimising risk of harm, are summarised. The analytical approach of thematic analysis (Braun and Clarke, 2006; 2019) is appraised and applied, before key reflexivity issues are explored.

Chapters 5 to 7 present the analysis of the data collected during the project fieldwork. Chapter 5 explores how MHWB policy messages are developed and transmitted to schools by key stakeholders in policy, regional and community organisations, and will respond to research question (RQ)1:

What policy messages are developed by policy, regional and community stakeholders for school-based MHWB and how are these transmitted to schools at the community-school interface?

Stakeholders across policy, regional and community organisations develop clear messages regarding the need for mental health and wellbeing interventions, and communicate that the role of the primary school in effectively intervening is paramount. Whilst these messages are clear, there are divergences in approaches from across the policy, regional and community levels of influence on provision. Divergences result from inter-organisational tension and conflict over how best to strategise, define, measure and assess school-based provision. MHWB policy messages are therefore considered conceptually confused (Ecclestone, 2012) and ‘hyperactive’ (Clarke, 2012; Dunleavy, 1987) as they demand different and often conflicting and confusing responses and approaches at the school level, raising issues about how schools interpret and enact these messages.

Chapter 6 traces how schools enact these policy messages, interpreting the abstracted content of messages and ‘recontextualising’ (Bernstein, 2000) them into workable, contextually-relevant interventions, responding to RQ2:

How do school staff enact policy messages and how do these processes affect the implementation of MHWB interventions in schools?

Schools face key moral, ethical and legal challenges selecting relevant interventions from a substantial and ever-growing evidence base. Guidance is clear on the fact that schools should be intervening, and school level stakeholders (for example senior leadership teams, teaching, support staff) have strong moral and ethical orientations towards messages relating to these messages. Schools subsequently feel that they are not always in possession of clear direction as to how best to intervene, and many school stakeholders find that current messages do not adequately consider the unique contexts of individual schools, and therefore are not always considered the most relevant approaches to implement. Instead, schools trial many approaches, often adapting existing interventions such as Nurture groups, Circle Time, Emotional Literacy Support (ELSA) or building approaches from the

ground up. Schools' modifications of these interventions are self-organising (Greenhalgh and Papousti, 2019) responses to their unique context. Further questions are raised as to how pupils experienced the practices of both universal and selective school-based MHWB as a result of schools' recontextualisation (Bernstein, 2000) processes, providing a novel perspective on the implementation of MHWB interventions in different school contexts.

Chapter 7 is comprised of pupil data, centred on a number of illustrative intervention case-studies to document key leverage points and barriers in current MHWB intervention practice, answering RQ3:

How do pupils experience the practices of universal and selective school-based MHWB interventions in light of schools' recontextualisation processes?

The theories of liminality and *communitas* (Atkinson and Robson, 2012; Turner, 1967) were used to explore the pupil level data. Pupils' experiences are analysed in relation to the development, transmission and enactment of MHWB policy messages. Pupil experiences of these interventions are highly contingent on key leverage points, including: the affordance of privacy and expression, the work of school staff in developing emotional spaces of empathy, trust, understanding, a flattened school hierarchy, and the application of de-formalising and de-stigmatising practices by key school staff, often ELSA-trained support staff. De-formalising and de-stigmatising practices lead to pupils taking ownership of emotional spaces, and this was considered a reflection on well-implemented and favourable programmes. Conversely, interventions adopting behaviourist approaches, or that were insufficiently de-stigmatising or informal, were arguably construed as less effective.

Chapter 8 situates the thesis, reflecting back on the key findings. It outlines the unique contribution of the work in establishing the relationship between the development of conceptually confused and hyperactive policy messages, and problems with effectively transmitting these to schools. It provides insights into schools' enactments (Ball et al., 2011; Braun et al., 2011) of these messages, where schools accept and reject various messages, whilst they self-organise in search of

contextually-relevant interventions. The work is also unique in establishing leverage points and barriers to effective pupil experience of, and engagement in, MHWB interventions, tracing these experiences back to the policy messages which are developed and transmitted by policy, regional and community stakeholders, and subsequently enacted by schools. This chapter reflects on the study design and theory before offering key recommendations for policy and practice, both in relation to the specific case study and the wider field of the development of interventions within complex adaptive systems.

Chapter 2: The development and implementation of mental health and wellbeing policy in primary schools

2.1. Introduction

This chapter explores the key UK and Welsh policy context for school-based MHWB provision. It considers why and how policies have been developed, and schools' implementation of policy in the form of MHWB interventions. It appraises the effectiveness of existing interventions and the limitations of the current evidence. It explains that, though significant research has been conducted into school-based MHWB interventions from a global and UK perspective, less is known about these interventions in the context of the Welsh education system. As education is devolved and therefore different policies exist, the Welsh educational context is unique. Moreover, limited research exists regarding how educational policy contexts affect the development of interventions, and therefore, little is known about how policy is translated into practice and the factors affecting this process.

This thesis uses a number of terms which require definition. 'Policy' relates to the official documentation produced by central and Welsh governments. 'Policy messages' is used to denote the core elements of policy that are communicated to other stakeholders and schools within educational systems, for instance what is required and how to respond. 'Intervention' is a term used consistently in reference to school level approaches, and is used interchangeably with 'programmes' or 'intervention programmes'. 'Provision' refers to a range of interventions.

The first section will focus on the UK and Welsh policy context. Within this section the foundations of, and justifications for, policy will be explored, and why primary schools are considered key sites for intervention. This section will define policy and outline key approaches from Welsh Government policy before reflecting on how schools have implemented policy in the delivery of MHWB interventions. The second section will deliberate how effective current school responses are, concluding that the current evidence is mixed. It will also explore existing tensions over where to locate responsibility for provision.

Research documenting positive effects of school MHWB interventions are countered by studies detailing a range of limitations, including that interventions have led to small or neutral effects, that current evaluations of interventions are underpinned by poor methods and that the implementation of some interventions have led to unintended, negative effects. Also, sustainability and transferability between contexts is a key issue precluding overall effectiveness, and many interventions are arguably still not attuned and developed with specific context of school systems in mind.

2.2. The UK and Welsh policy context

This section outlines the current policy context for school-based MHWB provision. It provides the origins of and justification for MHWB policy in the UK. Policies can be contextualised as a response to the increasing prevalence of poor MHWB outcomes in children and young people (Green et al., 2004; Humphrey and Wigelsworth, 2016). This section will also consider why primary schools are considered a relevant setting for MHWB intervention and will reflect on some of the key tensions around current UK-wide policy. It will finally detail the specific educational policy context for Wales.

2.2.1. Origins of policy

UK MHWB policy has largely originated in response to epidemiological research into the increasing prevalence of clinical-level mental health conditions among children and young people, as well as to the social and economic disadvantage in the life-course that can be produced by early onset mental ill-health (Holmes et al., 2018; Jaffee, 2018; Kieling et al., 2011). Prevalence studies have found the average onset age for generalised anxiety disorder to be 11 years old (Collishaw et al., 2004; Kessler et al., 2005; Maughan et al., 2005), in the UK, the transitional age from primary to secondary education, and a key point in which primary schools are still able to intervene.

Latest prevalence statistics from the UK document one in eight (12.8%) of five to 19 year olds had at least one mental health condition in 2017 (NHS Digital, 2018).

Furthermore, half of all cases of mental illness start by age 15 (Kessler et al., 2005) with 75% developing by 18 years old (Davies, 2014). Just under 13% of children and young people between 5-19 currently meet clinical level criteria for mental health conditions (Sadler et al., 2018). As a result, in the UK policymakers now view child and adolescent mental health as 'everyone's business' (Ford et al., 2007).

Recent research connects poor mental health in children with continuing mental health problems in adulthood (Sheehan, 2017), with unmanaged stress in young people particularly considered to potentially create longer-term problems (Hartley and Henderson, 2018). Longitudinal research analysing results from over 17,000 children in England, Wales and Scotland, has also found links between mental health conditions in childhood and adolescence and the long-term effects on ability to work in adulthood (Goodman et al., 2011). Critically, estimates suggest that 75% of children and young people who have potentially clinically referable mental health conditions do not have access to specialist services (Dvorsky et al., 2014; Humphrey et al., 2016). This research contributes to significant interest in school-based child mental health in the past two decades from wide-ranging supra-systemic actors (King and Fazel, 2019).

2.2.2. Why are primary schools considered relevant settings for MHWB provision?

Based on the epidemiological research, primary schools in particular are considered uniquely placed and relevant for MHWB provision by policymakers and other stakeholders in educational systems in the UK. Policymakers in the UK and Wales have concerned themselves with early intervention and prevention efforts to ensure the instances of mental health conditions in children do not worsen in adolescence and adulthood as documented by research including Sheehan (2017). Therefore, primary schools are feasibly better placed compared with secondary schools to achieve this. Primary schools are thus conceived a relevant and logical setting for early intervention efforts as they provide an opportunity to intervene prior to the critical period in the life-course of children (Pearrow and Whelley, 2006; Sanchez et al., 2018; Stefan and Miclea, 2010) and they are also considered key in terms of mitigating unprecedented demand on clinical service provision.

Substantial efforts and pressures have therefore been conveyed by policymakers on primary schools to effectively deliver MHWB interventions, with primary schools exposed to various reforms and demands from policy makers over the past thirty years (Braun and Maguire, 2018). Furthermore, a recent longitudinal study over thirty years found significant associations between childhood education and adult mental health more than 25 years subsequently (Kosik et al., 2018) with the opposite also having also been substantiated by studies, namely that poor child mental health correlates negatively with educational attainment (Brännlund et al., 2017).

Interestingly, contemporary research also suggests that positive mental health has some positive associations with a range of academic outcomes (O'Connor et al., 2018; Henderson et al., 2014), therefore effective MHWB provision consequently carries substantial incentive for schools as well as policymakers.

With gaps in clinical service provision and clear research suggesting the maintenance of good mental health and prevention of mental health conditions from developing in children can have strong, positive longitudinal effects, policymakers are increasingly looking to schools to provide MHWB provision for pupils. The research documents a growing need for intervention programmes focused on improving and sustaining the mental health of children and young people, and findings have been operationalised by policymakers to justify early intervention and prevention efforts from primary school-age and beyond.

2.2.3. Welsh education policy

As education in Wales is devolved, there is unique policy to be considered. Schools in Wales are now legally responsible for the MHWB of their pupils due to assessment policy changes. For instance, the Common Inspection Framework (Estyn, 2017) incorporated the evaluation of 'wellbeing' provision, a clear message to schools and other supra-system stakeholders that this provision is a statutory requirement within the educational remit of primary and secondary schools. This thesis commenced in 2016 at a time of educational transition, with the current curricula for primary and secondary schools under review and development.

The Welsh school curriculum is currently undergoing substantial redesign following the independent 'Successful Futures' review (Donaldson, 2015). Curricular redesign is ongoing, as of October 2020, with traditional subjects re-conceptualised as 'Areas of Learning and Experience', with Health and Wellbeing featuring as one. The revised curriculum has four 'purposes', with the following specific to developing 'healthy and confident individuals':

All our children and young people will be healthy, confident individuals who: have secure values and are establishing their spiritual and ethical beliefs; are building their mental and emotional well-being by developing confidence, resilience and empathy; apply knowledge about the impact of diet and exercise on physical and mental health in their daily lives; know how to find the information and support to keep safe and well; take part in physical activity; take measured decisions about lifestyle and manage risk; have the confidence to participate in performance; form positive relationships based upon trust and mutual respect; face and overcome challenge; have the skills and knowledge to manage everyday life as independently as they can and are ready to lead fulfilling lives as valued members of society. (Donaldson, 2015, p. 31)

The latest curriculum development published in 2020 (Welsh Government, 2020) proposes that primary schools will implement the new curriculum from September 2022. Therefore, this thesis has conducted empirical research in a transitory period, where schools were aware of overarching changes in policy and curricular activity, though without specific details of the implementation of the new curriculum. Where at this stage, policy messages are not clear due to developmental work ongoing, analysing these messages resulting from this specific time therefore captures a unique perspective with scope for policy and practice recommendations based on the findings.

2.2.4. How have schools implemented policy?

Schools have implemented policy with the delivery of MHWB interventions. This section will firstly consider these responses, before outlining the key types of intervention currently implemented in UK primary schools. In recent years, schools in both the UK generally, and Wales specifically, have responded to policy in the implementation of various discrete interventions within a wider suite of MHWB approaches. These approaches have focused on social and emotional development, 'wellbeing' and mental health. Within the approach of MHWB in schools, there exist related constructs including the development of resilience, as well as 'social and emotional learning' (SEL), an approach focused on enhancing pupil wellbeing and mental health (Tennant et al., 2007). Humphrey (2017) discusses how SEL-focused MHWB emphasises strengths-based mental health perspectives where agency and resilience are centralised, noting how 'viewed through this lens, mental health is fundamentally about a state of wellbeing' (Humphrey 2017, p. 130).

Humphrey (2017) refers to schools' adoption of the 'dual factor' approach, referring to a combination of preventative psychological and promotive, MHWB-focused activities. Dual-factor approaches are considered applicable and relevant to 'populist models of school-based provision' (Humphrey 2017, p. 130), for example those advocated by the World Health Organisation's 'Healthy Settings' approach, formulated by the 1986 Ottawa Charter (World Health Organisation, 1986; World Health Organisation and WHO Global School Health Initiative, 1996). Schools' responses to policy have been increasingly modelled around these approaches.

Many school approaches to MHWB are typified by a skills-based approach to promoting positive mental health, based around a number of core competencies such as emotional regulation and management, resilience and motivation, having a sense of coherence, self-understanding, and the ability to build relationships and empathise (MacDonald et al., 1998; Weare, 2010, 2000). The focus on enhancing wellbeing instead of a pathological interpretation of provision has in part been driven by an anti-stigma narrative. For example, in recent years, the UK has been host to national campaigns by organisations such as 'Time to Change' and 'Mind', which

have sought to de-stigmatise the prevalence of mental health conditions in both adults and children.

School-based MHWB interventions can be largely classified into three types of provision: universal, selective and whole-school. Universal approaches are those which focus on whole classes within schools, and do not demarcate based on 'risk' categories. Universal interventions can be delivered across singular or multiple cohorts within school settings. Whole-school interventions refer to where all pupils within a school receive the same provision, and there exists consistency of provision across all cohort groups within school systems. Whole-school provision often culminates in longer term changes to curricula and developing teacher education, school ethos and values, parental and community education and engagement and inter-agency collaboration (Weare and Nind, 2011).

Selective interventions instead focus on providing for students who might be deemed 'at risk' or 'vulnerable' to developing mental and emotional health problems, or who present symptoms that suggest a clinical-level diagnosis could be met in future years. These groups are frequently 'selected' for specific interventions, which often take the form of one-to-one or group sessions, or a specific element of a wider intervention package as part of a combined, dual-component effort.

Selective programmes have traditionally been found to be generally more effective in fulfilling their desired outcomes across a range of systematic reviews and meta-analyses of evaluations, compared with universal interventions (Rones and Hoagwood, 2000; Wilson and Lipsey, 2007). These findings have been widely thought to occur as a result of 'floor effects commonly found in prevention science when intervening with an entire population rather than with a selected subset of individuals with a more documented need' (Sanchez et al., 2018, p. 161; Stoolmiller, Eddy, and Reid, 2000). This reading of the evidence would therefore suggest that post-intervention effect sizes are more likely to be higher for programmes that focus on groups or individuals who are more likely to benefit from it, and the effects of interventions which do not select particular groups or individuals will be tempered by null or slight effects for those who may benefit less from the programme because they may require the provision less in comparison.

Nonetheless, universal provision can afford other potential benefits not necessarily linked directly to outcome measures. Sanchez et al. (2018) describe how universal MHWB programmes can provide a useful and important role in reaching a larger proportion of children and young people, and can help foster engagement and involvement with schools and parent communities (Heller and Fantuzzo, 1993; Rones and Hoagwood, 2000). Perhaps more importantly, this paper illustrates how universal interventions can, in some cases, have an equalising and normalising effect, reducing the stigma that can be associated with mental ill-health or the negative implications which may arise from being 'selected' for intervention. There are, however, contentions around the assumption that MHWB intervention programmes are inevitably required in non-clinical settings such as schools, and that these are inherently positive in their remit (e.g. Myers, 2012).

The next section will focus on schools' responses to the wider policy context. Intervention evaluations synthesised in this section refer to MHWB intervention implementation conducted by schools across the UK generally as well as Welsh schools within the wider context of the UK. As of October 2020, though the Welsh curriculum review is ongoing, the research focused on in this chapter refers to MHWB interventions developed and evaluated prior to this change. Welsh schools are unlikely to have had the opportunity to respond to this policy change in the implementation of MHWB interventions, and the following studies are therefore considered at a UK and international level.

2.3. Mixed effectiveness of school-based MHWB interventions

This section will focus on the effectiveness of school-based MHWB interventions, considering that the current evidence is mixed. Though there exists literature suggesting a variety of MHWB interventions do achieve their intended outcomes, particularly those which aim to improve pupil mental health, socio-emotional skills and academic attainment, there are a number of limitations that serve to undermine this evidence. The limitations are divided into key themes. Evidence that interventions often lead to either small or neutral effects is presented, that the quality

of many evaluation studies should be questioned, and that some interventions have also caused unintended, negative effects.

The fundamental issue of poor implementation across a range of programmes is also explored, and key reasons for this are theorised, including weak transferability across contexts, poor acceptability of interventions by those delivering interventions, and a lack of co-production and attention to school context in the development of programmes. This section will conclude by providing an insight into potential ways to improve the development of MHWB interventions, with specific focus on sustainability and context. It is not possible to present a comprehensive review of school-based MHWB interventions due to the size of the evidence base. However, this section will synthesise a range of meta-analyses, systematic reviews, other large-scale literature reviews and papers relative to evaluations of key widely-implemented interventions.

2.3.1. Positive outcomes in key domains

There exists an emergent literature suggesting that a range of MHWB interventions achieve their intended outcomes across various domains, including improved mental health, socio-emotional skills and academic attainment. Longitudinal research with a 13-19 year cohort has suggested a significant, positive association between the teaching of social and emotional skills and a number of outcomes including education, work, substance use and mental health (Jones et al., 2015). Likewise, a recent global meta-analysis of MHWB focused on the development of a range of psychosocial skills, competencies and attitudes, highlighted that 'post-intervention social-emotional skill development was the strongest predictor of wellbeing at follow-up' (Taylor et al., 2017, p. 1156).

Research demonstrates the neurological benefits of MHWB interventions as well as links to increased academic attainment (Durlak et al., 2011; Greenberg, 2006; Zins et al., 2007). Mindfulness interventions, frequently bracketed under the broad umbrella of MHWB, have also demonstrated tentatively positive effects. Vickery and Dorjee (2016) reported the findings of a controlled feasibility pilot study assessing

the 'Paws b' mindfulness programme for 7-9 year old children in primary schools. Findings from their study suggested the programme was feasible as part of the primary curriculum, acceptable to most pupils, and 'may decrease negative affect and improve meta-cognition' (Vickery and Dorjee 2016, p. 1).

A large-scale review of universal school-based MHWB programmes was conducted by Durlak et al. (2011), integrating 213 programmes, many of which were based in the US and UK, involving over 270,000 kindergarten to high-school age students. This review has been cited over 1,900 times, and has had wide-ranging impact within the MHWB research community. This review viewed multi-component programmes as programmes which had both a classroom and a wider, whole-school element. The study only included controlled studies. Where only 47% were randomised controlled trial (RCT) designs, the evaluative quality of this review is higher than many others. 56% of studies were developed for primary schools.

Durlak et al. (2011) noted generally that MHWB programmes improved academic attainment as well as social-emotional competence. Classroom interventions delivered by teachers as opposed to external staff were more effective for the provision of social and emotional skills and positive social behaviour than multi-component programmes with a non-school, staff-led element. Durlak et al.'s (2011) findings suggest that, at least in the short-term, effective implementation of these programmes was a critical factor for the success of intervention programmes.

Likewise, a recent systematic review (Dray et al., 2017), focused on the effect of 'resilience' programmes on a range of mental health outcomes in children and adolescents, including symptoms of anxiety and depression, hyperactivity, internalising and externalising problems, conduct, and psychological distress came to similar conclusions. This review also exclusively included RCTs of programmes and found 57 relevant studies. The review found that programmes were generally effective in reducing prevalence in four out of the seven outcomes, notably symptoms of depression, internalising and externalising problems and psychological distress.

A 2015 meta-analysis (Jiménez Barbero et al., 2015) of the effectiveness of a range of anti-bullying programmes (including 'KiVa', a programme used in Wales and the UK more broadly, adapted from Finland) synthesised randomised clinical trials of 14 programmes, and found moderate (but not statistically significant) positive effect sizes for the meta-analysed outcome measures: bullying/school violence frequency, victimisation frequency, school climate and attitudes for and against bullying/school violence.

A 2018 meta-analysis of a range of universal, selective and indicated primary school MHWB programmes (Sanchez et al., 2018) included either RCTs or quasi-experimental designs with matched samples of programmes that were delivered by school staff. This paper reviewed 43 controlled trials spanning nearly 50,000 primary school pupils, and noted that, overall, either marginal to medium positive effects existed across a range of outcomes relative to decreasing mental health problems. The study found differences in overall efficacy between the main types of programme, with the best effects noted for selective interventions, then indicated, followed finally by universal provision (Sanchez et al., 2018). Sanchez et al. (2018) found programmes that integrated MHWB provision within wider educational curriculums demonstrated particularly positive effects, and these were particularly effective at reducing internalising problems.

Intervention-specific studies have suggested positive effects in developing social-emotional skills. The FRIENDS programme, a MHWB intervention designed to reduce anxiety and improve pro-social skills and self-esteem in both children and young people, based on cognitive behavioural theory, was evaluated by Stallard et al. (2005) in the UK. This evaluation found that the data from the FRIENDS programme 'showed significantly lower rates of anxiety and significantly improved level of self-esteem. Significant improvements were obtained in over half of those children with the most severe emotional problems' (Stallard et al., 2005, p. 1016).

Goldberg et al.'s (2019) meta-analysis of whole school social-emotional interventions in schools synthesised findings from 45 studies of 30 interventions, involving nearly 500,000 participants. In this review they found that post-intervention outcomes resulted in 'significant but small improvements in participants' social and emotional

adjustment, behavioural adjustment, and internalising symptoms' (2019, p. 755). Their review was however less certain of an evidential link between these interventions and improved academic attainment. Pandey et al. (2018) in their systematic review and meta-analysis of the examination of the effectiveness of universal, self-regulation based MHWB interventions however found that a range of interventions were successful in achieving this outcome.

Sancassiani et al. (2015) state that a wide range of different interventions underpinned by the advancement of social-emotional competence were largely effective in improving these skills and behaviours, as well as psychological wellbeing, healthy behaviours and in some cases, academic performance. Moreover, Riglin et al. (2014, p. 335) note that their meta-analysis findings, focused on establishing a relationship between emotional problems and subsequent academic attainment, show that 'early identification and provision of support for young people with emotional problems may be helpful for improving academic outcomes such as school attainment'.

The literature has also identified a number of key leverage points for effective MHWB intervention. Supportive staff-peer relationships have been considered crucial facilitators by various studies, as well as school-parental collaboration, students' freedom for self-expression, and the regular delivery of programmes, have been considered in a review of the evidence in relation to the impact of MHWB programmes on students' non-cognitive (social and emotional) skills (Siddiqui and Ventista, 2018). Weare and Nind (2011) undertook a large-scale review of reviews, systematically searching the literature and synthesising results from 52 systematic reviews as part of the European Union 'Dataprev' project. Their review has comprehensively mapped out some of the key leverage points for effective programmes. They note:

The characteristics of more effective interventions included: teaching skills, focusing on positive mental health; balancing universal and targeted approaches; starting early with the youngest children and continuing with older ones; operating for a lengthy period of time and embedding work within a multi-modal/whole-school approach which included such features as

changes to the curriculum including teaching skills and linking with academic learning, improving school ethos, teacher education, liaison with parents, parenting education, community involvement and coordinated work with outside agencies. (Weare and Nind, 2011)

Kidger et al. (2012) systematically reviewed the effect on the school environment (a key element of a whole-school approach) on the emotional health of young people, finding some evidence that individual-level perceptions of teacher support and school connectedness were predictors of future emotional health, although they note limited evidence exists regarding the impact of the school environment on adolescent emotional health. Sancassiani et al.'s (2015) review however established key individual-level, behavioural facilitators for effective MHWB, corroborating some of the above findings by Weare and Nind (2011):

Many reviews of school-based interventions state that the acquisition of social and emotional skills was associated with a wide range of important outcomes in the youth, including: positive youth development, character education, a reduction in depression and anxiety, conduct disorders, violence, bullying, conflict and anger. This amount of data allows considering emotional and social skills improvement as an outcome in itself. (Sancassiani et al., 2015, p. 37)

This section has presented a range of large-scale studies documenting the effectiveness of school-based MHWB interventions. However, the evidence shows that there exist a number of caveats and limitations to this evidence, of which the key themes will be presented below.

2.3.2. Limitations

This section presents a range of literature suggesting that the positive accounts documented above should be approached with caution. This section will note that counterfactual literature points towards MHWB interventions only producing small to neutral effects in their intended domains, often with regard to improving socio-

emotional skills, academic attainment and mental health. It will then consider that the evaluation quality of many studies that support claims of effectiveness are frequently methodologically flawed. MHWB interventions have also been found to generate unintended, negative effects. Also, where literature suggests that interventions produce positive outcomes, there also exist problems in documenting and measuring the sustainability of these effects, with many initially positive effects weakening rapidly.

2.3.2.1. *Small and neutral effects*

Various review studies have found less significant effects of school-based interventions on the MHWB and academic attainment of pupils. Mackenzie and Williams (2018) note small to neutral effects of these programmes. Moreover, in their narrative synthesis of 14 studies covering eight MHWB interventions focused on the effect of teacher-led interventions on the social and emotional skills of primary school children, Whear et al. (2013) noted that overall though small improvement had been observed across some outcomes, statistically significant effects were limited. Ultimately, they recommended that further research was required into both the implementation and comparative effects of MHWB programmes.

Furthermore, Corcoran et al. (2018), in their robust systematic review and meta-analysis of 50 years worth of high quality methodological research on the effect of MHWB on academic attainment, also noted that MHWB interventions had a positive impact on a range of academic outcomes including reading, science and mathematics abilities. However, they suggest 'programs from more rigorous randomized studies with large sample sizes that have dominated the classroom over the last few decades might not have as meaningful effects for pre-K-12 students as once thought' (2018, p. 56). Given the focus of policymakers in the UK on school-based MHWB approaches in their policy messages, it is problematic that most large-scale reviews, and particularly the most highly-regarded and thorough reviews where evaluation quality is concerned, report either a weak or no statistically significant effect of MHWB programmes on a range of academic outcomes (e.g. Iachini et al., 2015), MHWB and socio-emotional competence.

Returning to intervention-specific studies of key programmes, in their appraisal of seven evaluations of the widely-implemented, formally UK government supported programme SEAL (Social and Emotional Aspects of Learning), which ran in both primary and secondary settings, Humphrey et al. (2013) discussed how several of these evaluations reported null effects across some of the outcome domains, in particular parental ratings of the programme, and, perhaps more importantly given the advent of the perceived importance of social and emotional learning (SEL)-focused MHWB within political circles, social-emotional competence (Downey and Williams, 2009; Humphrey et al., 2010). To compound this, Humphrey et al.'s (2013) SEAL evaluation synthesis illustrated conceivable negative effects in relation to Key Stage 1 academic performance and Key Stage 2 pupil attitudes to school (Hallam et al., 2006), offering a stark counter to many of the positive effects reported in other papers, also suggesting research in the UK is less positive than in other international contexts, for example the US.

The most comprehensive overview of the SEAL intervention, fusing previous evaluations (Humphrey et al., 2013) found widespread implementation issues, citing variability of fidelity in many cases. SEAL was frequently found to be delivered not as intended, and the degrees to which the delivery of the programme stayed faithful to the original ideas were variable. Myriad evaluations of SEAL suggest there were issues with the theoretical and ideological approach of the programme, not just with the programme efficacy (particularly regarding the lack of long-term positive effects in the outcome measures where there were some inferential improvements) but also in the way the programme was evaluated and delivered at the national level due to 'policy hyperactivity', where both primary and secondary SEAL were rolled out when there was no clear evidence basis for at stage of implementation, or following the various evaluations discussed above.

This finding feasibly contradicts much of the literature connecting MHWB programmes to improved academic attainment, one of the cornerstones of how MHWB policy messages have been justified by policymakers. The significance of this is two-fold: firstly, it demonstrates that the evidence base concerning the connection between MHWB provision and academic attainment is variable and contradictory. Secondly, it highlights the potential for negative effects, examples of

which will be discussed below. These issues elucidate the issues foregrounded by the critique of the 'crisis of childhood', which are underpinned by critiques of the assumed requirement for, and positivity of, school-based MHWB provision (Cigman, 2012; Ecclestone, 2012; Myers, 2012). These arguments will be detailed in section 2.4.

2.3.2.2. *Unintended and negative effects*

The implementation of MHWB interventions in schools has led to unintended, and in some cases, negative effects. For instance, Weare (2015, e6) notes how 'too much emphasis on top down approaches has already, in the UK at least, led to the law of unintended consequences'. Evans et al. (2015) noted how the unintended effects of MHWB programmes have been under-theorised, and found a number in their Welsh case-study of the 'Student Assistance Programme', a selective MHWB intervention based around the identification of students and their subsequent engagement in the group-based programme. Students were found to consider selective identification within the SEL-focused MHWB context to be negative labelling which resulted in rejection of the school and the programme. Evans et al. (2015, p. 381) also found 'the label of SEL failure may serve as a powerful form of intervention capital, being employed to enhance students' status amongst peers' which is capitalised by sustained subversion of the intervention.

Similarly to Evans et al.'s (2015) finding regarding negative labelling, Gronholm et al. (2018, p. 5) conducted a systematic review into the potential stigmatising role of selective school-based mental health interventions, finding evidence of barriers to engagement in these interventions, catalysed by the experience of stigma. The authors note that 'it has been argued that schools provide a familiar, non-stigmatising service setting, and that school-based services can normalise help-seeking and subsequently increase students' utilisation of support (Baruch, 2001; Thorley, 2016)'.

Other commentators have countered this view, by suggesting that selective school-based MHWB risks stigmatising students by selecting them for intervention against specified criteria (Gronholm et al., 2018; Lupien et al., 2013; Rapee et al., 2006;

Weems et al., 2015; Werner-Seidler et al., 2017). Gronholm et al.'s (2018) systematic review thematically synthesised studies on a number of points related to the iatrogenic effects of MHWB provision. These categorised are as follows: (1) anticipated and experienced stigma; (2) consequences of stigma, and; (3) mitigating strategies.

Regarding anticipated and experienced stigma, negative labelling by peers, discriminatory reactions by peers and staff and compromised confidentiality were considered a powerful driver. Consequences of stigma included students' anticipatory anxiety about engaging in MHWB interventions, restricted disclosure within these spaces and a detachment from the provision. However, the authors did consider how studies in their review had reported mitigating strategies to stigma, and ways to subvert these unintended consequences included the development of trust and confidentiality, and increasing student choice and control regarding engagement.

Wood and Warin (2014) explored the use and interpretations of the UK Social and Emotional Aspects of Learning (SEAL) programme by primary school staff, specifically how the intervention was used by staff as a way to affirm or counter parental practices where they either positively or negatively viewed parental impacts on the perceived social-emotional competence of their children. The authors argued that SEAL was being operationalised to support the prevailing cultural practices of middle-class parents whilst simultaneously marginalising the practices and perspectives of parents from traditionally less educationally-represented groups. Their account serves to illustrate MHWB can be operationalised to afford and silence different groups within school communities through their use of a dominant discourse of a particular set of valued behaviours, and in the case of Wood and Warin's (2014) paper, failing to address or acknowledge the structural inequalities and stratifications that are frequently present within school communities.

Ultimately, the evidence base concerning whether selective MHWB leads to stigmatisation is mixed and is dependent on the extent to which mitigating strategies are adopted, however this work does provide support to much of the critique featured

subsequently about the assumptions often made that MHWB provision is an inherently helpful and positive enterprise (Ecclestone, 2012; Brown and Carr, 2019).

2.3.2.3. *Evaluation quality*

The quality of evaluations that have influenced the proliferation of school-based MHWB can also be questioned. Durlak et al.'s (2011) popular meta-analysis suggested there is potential for SEL-focused MHWB programmes to be conceived as successful and sustainable across multiple outcome themes in the longer-term, however, it is difficult to make an emphatic claim about programme sustainability based on the limited number of studies with follow-up data within the meta-analysis. Pearson et al. (2015) similarly suggest a lack of depth and rigour exists relating to how to embed school health programmes into routine school practices, and how to evaluate their adaptation and evolution processes over time. Though this paper surveyed school-based health promotion programmes generally, similar conclusions have been levelled at MHWB programmes specifically, which are presented below.

Cantone et al.'s (2015) systematic review of anti-bullying focused MHWB interventions, which was cited above with regard to positive effects, however highlighted the broad variability of evaluation designs and 'internal inconsistency in the findings of some studies' (Cantone et al. 2015, p. 58) as a factor prohibiting an ability to clearly document and establish long-term sustainability in large scale reviews. Returning to Kidger et al.'s (2012) systematic review of studies targeting the impact of the school environment on the emotional health of adolescents, the authors concluded that higher quality evaluations, such as 'large scale evaluations using natural experimental designs' (2012, p. 940), are required to progress the evidence base.

Similarly, where Cheney et al. (2014) noted an instantaneously positive impact on the social-emotional wellbeing of pupils attending group-based MHWB programmes such as Nurture, they claim that positive effects were limited by high level of sample attrition and considered the quality of their review as a limitation, as each intervention was only evaluated by one paper. Hughes and Schlösser (2014) also

reported overall positive effects of Nurture groups, likewise suggesting a need for further longitudinal and high quality work in the field.

Large scale reviews have also submitted that there exist methodological limitations which preclude strong evidence of intervention effectiveness. Stallard et al.'s (2005) review found positive effects of the FRIENDS programme in UK primary schools, however these findings were also methodologically limited. The authors noted 'further methodologically robust research is required' (Stallard et al., 2005, p. 1018), as there was no control group in the evaluation, nor no longer-term follow up. This evaluation corroborates the findings generally that many evaluations, meta-analyses and other reviews of evaluations, are too often either methodologically unsound, or lacking a long-term temporality. This finding was substantiated by a 2015 systematic review (Higgins and O'Sullivan, 2015).

Another recent systematic review of universal MHWB programmes also demonstrated a lack of methodological rigour present in many programme evaluations, particularly in terms of a shortage of randomised controlled trials (RCTs) focused on longitudinal cohorts or longer-term post-intervention follow ups (Sancassiani et al., 2015). Although this study exclusively synthesised RCTs of programmes ($n=22$) across the globe, in both primary and secondary school contexts, the findings state that MHWB interventions reviewed led to 'controversial findings, due to some methodological issues' (Sancassiani et al., 2015, p. 21), suggesting problems even at the highest level of evaluation quality. The authors found it difficult to systematically review or meta-analyse longer-term, post-intervention effects of these programmes, as only a fraction of the studies reviewed contained at least six-month time-point data.

A systematic review conducted by Cheney et al. (2014) reviewed eight selective group-based MHWB interventions designed to promote pupil MHWB. The authors state that school-based MHWB programmes are for the most part not evaluated using RCTs, and opine that this may be due to the fact that they 'do not lend themselves easily' to double-blind RCT evaluation (Cheney et al., 2014, p. 414). This might contribute to the broader reasons why it has proved difficult to

comprehensively state that school-based MHWB is effective, particularly in the long-term.

Due to the quality of current MHWB programme evaluations, more work arguably needs to be done in order for researchers to make judgements on the long-term effectiveness of many programmes, with calls particularly for larger, methodologically well-designed and rigorous studies with longitudinal cohorts (Cheney et al., 2014). Similar contentions have been made regarding US SEL-focused MHWB programmes, where ideally, RCT designs (Schachter et al., 2008) and long-term implementation measurements at follow-up are considered required to develop the research base and ascertain the strength of MHWB (Calear and Christensen, 2010a, 2010b; Kavanagh et al., 2009; Salerno, 2016).

Mackenzie and Williams (2018, p. 1) agree that 'further high-quality and large-scale research is required across the UK in order to robustly test any long-term benefits for pupils'. Waldron et al. (2018) note that sustainability of some MHWB interventions has been documented up to a twelve-month follow up timeframe, but researchers know less about longer-term effects. Equally, Siddiqui and Ventista (2018) also found that there was a lack of evidence regarding the 'persistence' of intervention effects and how sustainability can moderate students' life-course trajectories.

2.3.2.4. *Sustainability*

Evaluations of school-based MHWB have struggled to evidence sustainability of initially positive effects. Findings suggest there exist many MHWB interventions that achieve their intended outcomes, and that some programmes achieve these outcomes at post-intervention evaluation time points (often around six months post-delivery). However, there are frequent instances of implementation and adaptation problems at the evaluation stage. Many intervention evaluations demonstrate less favourable post-intervention results when considering the monitoring of effect sizes from a longitudinal perspective, with the weakening of effects also documented.

Cheney et al.'s (2014) UK-based systematic review of targeted, group-based interventions reviewed eight interventions including Nurture, a commonly-used MHWB programme in both UK primary and secondary schools focused on developing positive early relationships in school environments, selective components of the SEAL programme, and the FRIENDS intervention. Their review highlighted that the strongest intervention out of the three reviewed was Nurture, with the majority of variations on the programme effective in at least one outcome measure. The FRIENDS programme was deemed useful, however the evidence for this was considered thin and requiring further evaluation. SEAL however was the least effective programme, with initially fair or statistically significant positive effects in outcome measures reduced or lost at 7-8 week post-intervention follow up, suggesting a rapid lessening of effects and that the particular programme components evaluated in this instance struggled with sustainability.

Likewise, the Dray et al. (2017) systematic review of resilience-focused MHWB programmes which found positive effects across a number of domains also found that in short-term follow up outcomes, only two out of seven outcomes were reduced: symptoms of anxiety and symptoms of depression. Long-term follow ups only showed effectiveness for internalising problems, corroborating evidence from other systematic reviews of both SEL and psychosocial interventions (Franklin et al., 2017, 2012; Sanchez et al., 2018). More importantly, the review illustrated considerable weakening of effects in the six other outcome measure domains. Current knowledge around these factors in the context of MHWB interventions is therefore a potential barrier to future effectiveness.

Durlak et al.'s (2011) findings, discussed in relation to the positive associations found between universal MHWB programmes and academic attainment and social-emotional competence, have their limitations, and these also extend to sustainability. Only 15% of the studies included in the meta-analysis collected follow-up data at least six months after the intervention. Consequently, analyses of programmes were limited to those which included immediate post-intervention data, suggesting that these findings cannot be viewed using a long-term sustainability lens. Nonetheless, the study did find that although effect sizes did plateau, 'the mean follow-up ESs remained significant for all outcomes in spite of reduced numbers of studies

assessing each outcome' (Durlak et al. 2011, p. 413). Effects were sustained for around 66 weeks for SEL skills, and 150 weeks for academic performance measures.

Systematic reviews and meta-analyses of preventative psychological interventions, for example focused on the reduction of symptoms of anxiety and depression in children and adolescents, rather than promotion of socio-emotional competence, show similar outcomes to these aforementioned programmes, and also show a significant weakening of effects over time. Though a recent review conducted by Werner-Seidler et al. (2017) of RCT evaluations ($n= 81$) found minor positive post-intervention effects for both depression and anxiety-focused programmes, these initial effect sizes had more than halved for depression-focused programmes at a one-year follow up mark, and a significant weakening of effects for anxiety-focused programmes had also occurred by the same time-point. Systematic reviews of anti-bullying programmes found similar problems regarding a lack of long-term post-intervention sustainability, or of a documented establishment of long-term effects, following up initially promising findings (Cantone et al., 2015). Other studies solidify the evidence base in favour of only small to medium effect sizes in depression and anxiety prevention programmes (Corrieri et al., 2014; Mychailyszyn et al., 2012).

Wigelsworth et al. (2016, p. 367) note from their study that the 'stakes continue to be high' for the adoption of universal MHWB programmes, and these comments can be read in the context of continual and rising interest in a range of MHWB programmes focused on school pupils from policymakers and other stakeholders in educational supra-systems. However, they suggest MHWB 'can potentially be effective in addressing serious societal concerns of social-emotional wellbeing and behaviour, there is comparatively limited understanding of how positive effects can be consistently maintained' (2016, p. 367). Lack of sustainability continues to undermine substantial, positive steps taken in recent years. A more recent take on sustainability arises from a 2020 review paper by Herlitz et al. (2020). The authors note:

The sustainability of school-based health interventions after external funds and/or other resources end has been relatively unexplored in comparison to health care. If effective interventions discontinue, new practices cannot reach

wider student populations and investment in implementation is wasted.
(Herlitz et al., 2020, p. 1)

In their qualitative synthesis of 24 studies of 18 unique MHWB interventions, Herlitz et al. (2020) asked the following questions relative to the aims of this thesis: (1) what evidence exists about the sustainability of school-based health interventions?; (2) do schools sustain these interventions once start-up funds end?, and (3) what are the barriers and facilitators to sustainability? The authors noted that none of the interventions were completely sustained; every intervention except one had at least some components that were sustained by some schools within multi-site evaluations. The authors noted that 'adaptation to the intervention to existing routines and changing contexts appeared to be part of the sustainability process', suggesting further examination of the self-organising properties of school systems in relation to MHWB interventions is necessary (Herlitz et al., 2020, p. 1).

Though, historically, school-based MHWB interventions have been widely considered to be effective with high implementation fidelity (Weare and Nind, 2011), these findings suggest that sustainability is a complex, poorly-theorised process within the existing school-based MHWB literature, and that schools' sustainability processes are contingent on adaptation to contextual fit. These programmes can be therefore considered as contextually-contingent, and as Herlitz et al. (2020) note, further primary research is required to explore these processes. Furthermore, where previous commentaries have warned of the importance and lack of attention toward the importance of sustainability of MHWB interventions, Herlitz et al.'s (2020) recommendation above provides further elaboration. Much of the literature in this chapter has surveyed the effectiveness of myriad MHWB interventions which have had temporal dimensions, often as a result of funding and resource limitations.

Many of the studies reviewed in this chapter synthesise evidence from funded programmes which are implemented for a specific time-frame, and evaluations frequently explore the effect sizes and general effects of MHWB interventions relative to the short term. Herlitz et al. (2020) identify a key barrier to the effective sustainability of these interventions, which is how schools sustain the initially positive effects that many reviews in this chapter have found in terms of the development of

an array of psychosocial outcomes. A sustainability lens can provide insight into what happens when these resources no longer support programmes. From the limited, methodologically sound literature that is available, tentative connections could be made between the worsening of effects documented previously, and the ways in which MHWB interventions are currently often funded and resourced. Other authors, such as Pearson et al. (2015), join the call for further research into sustainability. Pearson et al.'s (2015) review findings also focus on the need to focus on the adaptation and evolution of interventions over time.

Fazel et al. (2014) in a paper submitted to *The Lancet Psychiatry*, note that future research should directly focus on systemic-level implementation and the sustainability and maintenance of interventions over time. Contextual facilitators for sustainability mirrored many of the previously-theorised factors for effectiveness, for example senior leadership commitment, staff confidence in their delivery, and belief in, the value of MHWB programmes. Barriers include the prioritisation of educational over health outcomes, time, funding and resource constraints, turnover of staff and the dearth of intervention training (Herlitz et al., 2020).

As noted throughout the chapter, weaknesses in current evaluation methodology has been a significant problem for ascertaining whether, why and how MHWB interventions are sustainable in school settings. However, consistent implementation, or sustainability, has been considered as a key leverage point for effectiveness by various reviews (Weare, 2010; Weare and Nind, 2011; Wells et al., 2003), and has been considered a critical leverage point from an epidemiological perspective. For instance, research has found that the longer school pupils participate in school-based interventions for promoting socioemotional development, the lower the levels of internalising problems including social anxiety (Metsäpelto et al., 2010).

2.3.2.5. *Context: poor transferability, acceptability and co-production processes*

Though school-based interventions have often been implemented poorly, implementation quality has been considered as a key driver of overall success. This section will forward that implementation quality has been undermined by the poor transferability of interventions across cultural contexts. The acceptability of

interventions by school staff has also been a problematic barrier to effective implementation. Furthermore, it is forwarded that within the intervention development stage, a lack of contextual-focus and co-production with key stakeholders who might be able to provide key detail about unique context of intervention settings is a key process undermining the extant literature. The importance of context in relation to population health interventions has been also noted by Shoveller et al. (2015):

Research that fulsomely characterizes context improves our understanding of the processes of implementation and the effectiveness of interventions to improve the health of populations and reduce health inequalities. Context could be a key aspect to understanding what population health interventions best address underlying conditions that contribute to systematic differences in health status at the population level. (Shoveller et al., 2015, p. 487)

Ringeisen et al. (2003) noted that ‘unfortunately, the literature on “evidence based practices” in children’s mental health pays insufficient attention to features of the school context that might influence intervention delivery’ (2003, p. 154). Though, in recent years, public health researchers have become increasingly interested in school context as a potential moderating mechanism for the production of programme outcomes, Ringeisen et al.’s (2003) concerns are arguably still of crucial importance in 2020.

Hawe et al. (2004) note that aside from weak implementation, inadequate evaluation methods and poorly-designed interventions, ‘pre-existing’ context may also influence the modest or neutral effects found across intervention trials. Examples of where interventions have not transferred effectively across contexts suggests that the unique context of the settings in which interventions are delivered are important moderators for effectiveness. Furthermore, the fact that some interventions have been not deemed acceptable to those charged with implementing them suggests further exploration is required regarding how context might influence implementation success. Finally, the fact that many MHWB interventions are still not co-produced with those who will deliver them adds weight to a need for a new perspective on intervention development.

Transferability, or adaptation, has been considered a critical element of successful implementation of interventions. Without adequate adaptation, interventions are often received within settings as a poor fit, resisted by individuals affected by its implementation (Damschroder et al., 2009). Movsisyan et al. (2019) notes there exist examples of interventions that have been 'extensively' adapted, yet have been ineffectual in new contexts. School-based MHWB interventions have experienced adaptation problems. Indeed, in the UK, the first large-scale evaluation of the PATHS intervention (Promoting Alternative Thinking Strategies), a primary school MHWB programme, was conducted by Humphrey et al. (2016), focused on the domains of improved social-emotional competence and a range of mental health outcomes, with this programme experiencing such issues.

In their cluster RCT evaluation of PATHS, the authors discussed how the original US curriculum underwent cultural adaptation when it was originally recommended in an early intervention report, which was presented to the UK government (Allen, 2011) and subsequently developed for the UK context. At this stage the evidence base for PATHS was ambiguous: initial quasi-experimental designs suggested positive effects across both outcome domains (Curtis and Norgate, 2007; Hughes and Cline, 2014). However, subsequent RCTs were less favourable towards the efficacy of PATHS, with trials finding null effects across their primary outcomes (Berry et al., 2016; Little et al., 2012).

Nonetheless, Humphrey et al.'s (2016) study found, on the whole, the UK PATHS curriculum achieved its intended primary effects, namely increased teacher-reported social-emotional competence, as well as a range of secondary effects, including reduced emotional symptoms and peer problem and increased pro-social attitudes (teacher-report), as well as increased pupil engagement (child-reported). However, whilst these findings were promising, especially after the previous evaluations of PATHS, general effect sizes were still very small in the UK compared with the US.

Given the positive evaluations of PATHS reported in the US relative to a range of outcomes including social-emotional competence (Domitrovich et al., 2007), mental health (Crean and Johnson, 2013) and academic attainment (Schonfeld et al., 2015), where in some cases, positive effect sizes have also been sustained in the context of

alternative education provision (Kam et al., 2004), this suggests a problem with the UK adaptation. As Humphrey et al. (2016, p. 73) summarise, 'these mixed findings suggest that social and emotional learning interventions such as PATHS may not be as efficacious when implemented outside their country of origin and evaluated in independent trials'.

Although, on balance, the authors opined that the cultural adaptation process itself did not necessarily fully affect the implementation of the curriculum (the study reported high implementation fidelity) by teachers, it could feasibly be hypothesised that the curriculum did not fit with the socio-cultural context in which the programme was adapted for, as UK and US evaluations have been so varied in their findings. This is critical, as implementation has traditionally been considered the main marker of effectiveness where MHWB interventions are concerned. These findings are significant as they suggest other moderating factors, specifically context-contingency and relevance, are important for intervention developers.

In their review of the impact of various factors including the international transferability and adaptation of universal SEL-focused MHWB programmes, Wigelsworth et al. (2016) noted a step change in how the school-based MHWB field should be conceptualised, again in relation to contextual adaptation. Although the authors considered the potential of SEL-focused MHWB programmes to be effective in addressing social concerns over worsening epidemiological trajectories, they contemplated that 'the significance of cultural validity specifically becomes increasingly important, given that results from the current study suggest that SEL-focused MHWB programmes identified as successful can be rendered ineffective when transported to other countries' (2016, p. 367).

Though some MHWB interventions have been considered acceptable to schools (Kidger et al., 2016; Kuyken et al., 2013; Lendrum et al., 2009; Stallard et al., 2008), there exists mixed evidence that suggests many approaches are less acceptable to school staff and pupils. Intervention acceptability is seen to drive stakeholder engagement in programmes, with more engaging programmes found to be more effective (Cowan and Sheridan, 2003; Mautone et al., 2009). Evaluations of school-based MHWB interventions have often explored teachers' and other school staff's

satisfaction of implementing programmes. Lomholt et al. (2020) noted in their feasibility study of the selective intervention 'Back2School', focused on improving the self-efficacy of pupils with attendance problems, that though most participants surveyed found school participation in the intervention effective, teacher satisfaction was low. In their adaptation to the intervention, the level of school consultation in the programme was highlighted. Though this study was situated in Denmark, the theory generated from these findings can be applied to and tested in the UK context.

Acceptability of MHWB interventions by pupils has also been explored. Lombas et al. (2019) found in their 'Happy Classrooms' programme evaluation, an intervention focused on psychological wellbeing and cultivating a positive classroom climate, that the programme was not highly acceptable by the majority of students. In Kendal et al.'s (2011) empirical study in high school MHWB intervention development, they found that organisational context was important for schools' acceptability of interventions, finding across their various schools that differential engagement in advertising MHWB interventions led to different acceptability ratings across these settings. Organisational barriers such as resource limitations consequently affected schools' acceptance of interventions, corroborating UK findings from Humphrey et al. (2009). The authors note that 'it is therefore ethical and pragmatic to prioritise feasibility and acceptance over tradition in EWB [*emotional wellbeing*] interventions development' (Kendal et al., 2011, p. 198).

In their study, the authors reflected on how important schools' social cultures were in the ultimate success of MHWB interventions in being feasible and acceptable. They note their findings are congruent with Craig et al. (2008) who have highlighted the importance of context to both acceptability and feasibility. It is therefore critical for intervention researchers within the development stage to think further about how complex considerations of context, and how contextual considerations can help achieve better acceptability of interventions. One way in which this could be achieved is through a co-productive process (Kendal et al., 2011). Rather, stakeholder involvement which engages pupils, school staff, parents and senior leadership teams, is considered crucial in sustaining school-based mental health work (Dix et al., 2012; Lendrum et al., 2013; Weare, 2015).

Few programmes and evaluations of programmes have documented co-productive work in the developmental stage, even though engaging pupils in intervention development is considered a potential way to lead to more effective outcomes (Patalay et al., 2017). Moreover, Phillips and Morgan (2014) state that individuals' contributions to the care they receive has outcome and cost benefits in the context of health and social care. The importance of co-production has been considered for many years within the wider intervention literature. Reflecting on problems that school-based MHWB interventions have faced regarding poor transferability across cultural contexts, the co-production of interventions has been considered to be an important way to improve the cultural relevance of mental health services, in order to reduce inequalities (Lwembe et al., 2017). Co-production has been considered within wider health settings as a way to reduce health inequalities (Bedford, 2015), and has been also considered in empirical complex intervention development work to be an effective method for development (Reeve et al., 2016).

However, the role of co-production in the development of primary school MHWB intervention development has been poorly theorised (Medin and Jutengren, 2020). Apart from recent work (McCabe et al., 2017) there exist substantial gaps in the field. McCabe et al.'s (2017) work sought to ground programme evaluations from the unique perspectives of child participants who engaged with MHWB interventions. McCabe et al. (2017) explored the extent to which primary school children were involved in determining the acceptability of programmes, noting that relatively few programmes have involved children in this process. In their empirical research with primary school children, the authors found children found programmes which included culturally appropriate materials and those which were not stigmatising as more effective. McCabe et al. (2017) note that acceptability research regarding school-based mindfulness interventions is scarce and considered a significant gap in the literature (Villarreal et al., 2015). This gap applies to primary school pupils' perceptions of MHWB interventions generally.

This section has provided a synthesis of key large-scale reviews including meta-analyses and systematic reviews of the strengths and limitations of school-based MHWB interventions, globally and in the UK. Where the evidence base points towards MHWB interventions achieving a number of positive outcomes relative to

mental health, socio-emotional skill development and academic attainment, there exist a number of limitations which create a mixed evidence base and potentially undermine much of the positive reports. Limitations including neutral, small or even negative and unintended effects have been presented, alongside reports that evaluation quality is still relatively poor.

Currently, sustainability of positive effects has been problematic, with many reports of initially positive effect sizes weakening rapidly. Much of the reviewed evidence synthesised in this section suggest there is further work to achieve in relation to school-based MHWB. Insufficient attention to the contextual-contingency of MHWB interventions is considered a key explaining factor for many of the limitations documented above, tracing across implementation, adaptation and sustainability problems.

Context has been a factor within reviews of MHWB programmes over the last decade, but is increasing in relevance for public health researchers, and has been explored previously in relation to MHWB programmes, with Lendrum et al. (2012) noting that barriers to secondary school MHWB promotion, in the context of SEAL were worsened by the secondary school context. Contextual-contingency as a moderator for adaptation success was of course explored in primary settings, also, in regards to the PATHS (Promoting Alternative Thinking Strategies) intervention. The importance of school context has been explicitly considered in other intervention fields, including anti-bullying programmes (Bradshaw et al., 2009).

Moreover, Bonell et al. (2015), in their reporting of a pilot RCT for the INCLUSIVE intervention, a UK-based intervention to initiate local change in bullying and aggression using the school environment, provide evidence as to the context-contingency of these types of intervention. This study reflects the changing field of school-based health promotion over the past 5-10 years in favour of contextual examination, rather than considering schools as passive sites to deliver health educational activity. The study found that the effects of the INCLUSIVE intervention were moderated by different contexts.

As noted previously, various school-based MHWB programmes have struggled in retaining promising levels of post-intervention effectiveness when adapted for new contexts (Evans et al., 2019). As well as the importance of cultural context when considering adaptation, context can also be temporal. As Bonell et al. (2012) note, we cannot assume that historically-effective interventions will automatically work when applied again. Context is therefore considered crucial. This thesis therefore adopts the perspective that consideration of contextual drivers within complex adaptive systems is central to extending the evidence base around what works in school-based MHWB, particularly regarding implementing and sustaining effective practice across a number of different intervention approaches.

This is a salient point. As noted across this section, there are a multitude of current issues with the effectiveness of MHWB programmes, however, even in cases of those which achieve some element of success in achieving intended outcomes, frequently in line with social concerns around rising prevalence of mental health conditions in children and young people, the process of adaptation is a significant barrier to effectiveness in other cultural settings. The studies discussed above highlight further the variability and contradictory nature of the evidence base, and asks pertinent questions about why contextual-contingency of MHWB interventions is not foregrounded at the developmental stage. Wigelsworth et al. (2016) instead call for new methodologies for addressing the complex, contextual nature of MHWB interventions. Future work, in their opinion, should focus on the heterogeneity and complex nature of these interventions, providing further rationale for an in-depth study of complex educational systems where complex MHWB interventions will be explored in relation to their interaction with the school and system wide setting.

The overall inattention to complexity of interventions and intervention settings, particularly the unique context of MHWB interventions and the settings they are implemented in has been highlighted as a key limitation. Poor transferability of interventions across cultural contexts, as well as variable acceptability and a lack of co-production of many intervention development and evaluation studies, have been presented as key reasons for implementation problems. It is clear that the context of primary school MHWB interventions needs to be better explored and theorised in future intervention development studies. Contextual focus based on the above

literature should focus on the acceptability of programmes from the perspective of key stakeholders including school staff and pupils.

2.4. Tensions in locating responsibility

Though there exist strong justifications for school-based MHWB provision, tensions stand regarding how and why schools are centralised as responsible for the MHWB of children and young people by policymakers. Various authors have noted that policy directing schools to implement MHWB interventions have been largely unchallenged, and that the need for these interventions have been engaged with uncritically and have been presumed to be necessary. The critiques presented below have arisen from many of the limitations synthesised above.

Ecclestone (2012) situates a critique of this assumed need for intervention based on the regeneration of political interest in the application of behavioural psychology to MHWB after the change in central government in 2010. The author describes a turn towards a 'cultural therapeutic ethos [which] is integral to the current slip from discourses and associated practices of emotional and psychological wellbeing into a revival of an old discourse of character, and broader government interest in new ideas from behavioural science' (Ecclestone, 2012, p. 464). This renewed interest in 'character' therefore frames emotional and psychological wellbeing within the agency and remit of the individual rather than at organisational and systems levels, and the authors speak to the dangers in incorporating these messages within the philosophies of MHWB interventions.

Moreover, specific critiques have been levelled at UK central-government educational policy regarding how it has problematically framed pupils with mental health conditions as 'deviant learners' and 'mentally weak' (Brown and Carr, 2019). Brown and Carr (2019) note, even though increasing prevalence of mental health conditions in the school pupil population has led to government responses in the form of the 'enhancement agenda', actually, policies tend to frame those, particularly with 'less severe' mental health problems, as having a mental weakness.

These policies include the 'Mental Health and Behaviour in Schools' document (Department for Education, 2018) and the centralisation of a 'character education' vision predicated on the development of both character and wellbeing (Brown and Carr, 2019). Brown and Carr (2019, p. 251) deduce that 'underpinning the conflation of these two concepts is an assumption that mental illness, and its contrast, "wellbeing", is determined in the relative strength or weakness of individual cognitive processing'. This critique is situated within the wider arguments of a 'medicalisation of childhood' (Brown and Carr, 2019; Rafalovich, 2013), 'where children whose behaviour doesn't fit the cultural expectations of middle-class schooling are defined as disordered and pathological' (Brown and Carr 2019, p. 244).

Ecclestone (2012) contends that different perspectives on how best to intervene in child MHWB within schools creates 'conceptual confusion', as the ways in which programmes conceive the best way to approach school-based mental health provision often vary substantially, from promotion of social and emotional skills to prevention of mental health issues such as internalisation and externalisation problems, anxiety and depression symptoms. The author attributes this to the conflicting agendas of different interest groups who 'compete to define a problem and offer particular solutions' (Ecclestone, 2012, p. 469), and posited that many of the mixed and sometimes contradictory findings returned by intervention evaluations are caused by this conceptual uncertainty. How this plays out in policy responses is considered by Weare (2015, e7), who notes how 'changes imposed from without tend to be skin deep, with schools cynically and exhaustedly dropping the old initiative in favour of the next when fashions and government policies change'.

Myers (2012, p. 409) views the current cultural conceptualisation of child and adolescent MHWB as evoking a 'crisis of childhood'. Whilst the author acknowledges the growing evidence base of both epidemiological and MHWB intervention work, they counter this with a call for an application of a more critical lens when it comes to what he claims as wide-ranging assumptions made by the crisis of childhood discourse. One of the key elements of this critique is the claim that political accounts of worsening mental health trajectories are based on 'questionable historical thinking, on data that is subject to variable interpretation and on a silencing of difficulties that are intrinsic to social scientific accounts of change over time,

especially when some of the variables being measured are conceptually problematic and historically novel' (Myers, 2012, p. 411). These claims are feasibly strengthened by many of the evaluative weaknesses discussed previously.

Therefore, where there exist strong justifications for MHWB policy, these foundations have been critiqued for various reasons including problems with how current epidemiological evidence is captured and presented (Myers, 2012), how existing policies are potentially 'conceptually confused' (Ecclestone, 2012) and how these messages have been considered as creating dichotomies between mental strength and weakness, underpinned by what the authors view as problematic notions of 'character education'. These counter-arguments presented above suggest that though policies have strong foundations, there requires critical engagement in how they are interpreted and communicated within school level interventions.

The literature presented in this section however does not specifically cover the Welsh educational context, where education is devolved from central Government, and should be viewed as de-contextualised and in need of application to Welsh-specific data. This thesis will consider the validity of the above counter arguments and their application and relevance to the Welsh policy context. Extant literature has not, to the knowledge of the researcher, explored how policy messages in the Welsh context are developed and transmitted by educational stakeholders, and enacted by schools, and is therefore an important aim in exploring how abstract policies are made relevant by schools in the implementation of MHWB interventions.

2.5. Conclusion

Primary schools are considered critical actors in the delivery of MHWB interventions. However, there exist tensions in locating responsibility, with some literature focused on ensuring that the need for, and subsequent measurement of, school-based intervention is critiqued and fully justified (Ecclestone, 2012; Myers, 2012; Brown and Carr, 2019). Many MHWB programmes have attempted to develop a range of psychosocial outcomes in children and young people, such as improved wellbeing, self-efficacy, confidence, self-esteem, and inter-personal relationship building.

The current evidence base for school MHWB interventions is mixed, where positive associations between some programmes and a range of outcomes including improved mental health, socio-emotional skills and academic attainment is undermined by a number of limitations. These point to wide-scale problems with programme feasibility, implementation and adaptation, which subsequently impact on the long-term effectiveness and sustainability. The above issues have been considered by researchers a frequent problem for school-based mental health work for many years (Weare and Murray, 2004), and the findings of this chapter further substantiate these perspectives. Arguably, there also exist issues with the comparability of evidence across different contexts, with calls for the standardisation of outcome measures to enhance understanding and evaluation of MHWB interventions (Breedvelt et al., 2020).

This literature clearly highlights the gap in the research regarding a lack of knowledge about how the workings of schools and educational systems moderate intervention effectiveness and sustainability. Also, where implementation fidelity has been considered a key area for intervention researchers in recent decades, this perspective is perhaps more relevant to an intervention-level model of thought. Taking a systems-level perspective denotes considerations of wider factors including what happens when, and why, schools may undergo their own adaptation processes where fidelity of specific interventions is compromised. Alternative ways of approaching the development of MHWB programmes is therefore required to respond to the context-contingency of these interventions. However, Welsh educational policy is devolved and the extant literature has inadequately focused on the context of Welsh educational systems and how this context affects the delivery of MHWB interventions.

Whilst these studies frequently explore concepts of sustainability and effectiveness within individual interventions, there is still a substantial gap exploring these concepts not only within whole school level environments, but within wider systems. The existing literature theorises 'contextual' leverage points and barriers, however these are often limited to intervention-level, or school level, and ideally need to be explored using a systems lens. Other poorly-explored elements of the MHWB intervention literature base include that studies rarely demarcate between 'staff

within school settings. Often teachers are central to intervention evaluations and knowledge regarding the role of support staff is less established.

The following chapter will elaborate on the rationale and utility of a systems lens. One of the perceived benefits of this approach is the ability to explore the processes, practices and interactions of various interventions within the same system, providing more nuanced considerations of leverage points and barriers to effectiveness and sustainability.

Chapter 3: Understanding context in complex adaptive educational systems

3.1. Introduction

The previous chapter concluded that further work is required to understand the context of MHWB interventions, and how these interventions interact with the context of the systems in which they are introduced. This chapter will present the thesis' theoretical and conceptual framework for responding to the extant literature and the thesis' aims, namely exploring the development, transmission, enactment and experiences of MHWB policy messages in educational 'supra-systems' (Keshavarz et al., 2010). This framework has been chosen based on a critical appraisal of alternative ways of exploring the context-contingency of both interventions and the systems in which they are implemented.

The conceptual framework will enable the thesis to respond to recent calls in the field, as outlined in the previous chapter, to identify and explore contextual influences on the implementation of MHWB interventions in complex educational adaptive systems. The framework focuses particularly on the analytic concept of 'emergence' and the emergent properties of these systems, which are delineated into the triad of 'interdependencies', 'sensemaking' and 'self-organisation' (Greenhalgh and Papousti, 2019). These three properties are considered crucial for identifying how systemic context affects the implementation of school-based MHWB provision.

The chapter will firstly explore how researchers have attended to the context-contingency of interventions, and their limitations, by re-imagining the place of the intervention. The second section will then consider how the context of complex adaptive systems can be explored by critically appraising a range of frameworks, and core elements from a variety of contextual-focused frameworks will be synthesised. This section will conceptually connect a policy message lens with a fundamental complex adaptive systems theory, which will help achieve the aims identified above. The final section will conclude the chapter and present the study research questions, derived from pertinent considerations from the conceptual framework and review of the literature in Chapter 2.

3.2. Understanding and researching context

This section will document how researchers are increasingly attending to, understanding and researching context. Public health researchers have sought to respond to the limitations of school-based interventions, particularly the lack of attention to the context of interventions the systems they inhabit, by reimagining how interventions can be understood. This section will firstly present theories reflecting a complex adaptive systems approach to intervention development and evaluation, before defining and establishing the central features of context for the uses of this thesis. It will subsequently outline when context should be considered, and finally, how researchers have used frameworks to theorise and understand context.

3.2.1. Realist evaluation and complex adaptive systems

Much of the complex adaptive systems literature has helped guide the definitions and frameworks for exploring context outlined in subsequent sections, and it is important to pause and reflect on this literature. This section will firstly consider realist evaluation (Pawson and Tilley, 1997), a seminal work which foregrounded the importance of contextual attention over twenty years ago, as well as shifts in attention towards exploring the context of complex adaptive systems alongside intervention-level thinking.

Attention to the relationships between interventions and their context have been historically valid for the past two decades (Craig et al., 2018), with seminal work by Pawson and Tilley (1997) providing the conceptual foundation for much work within complex adaptive systems theorising and calls for the privileging of context within program theory. Realist evaluation provided the foundation for the 'context-mechanism-outcome' (C-M-O) perspective on the implementation of interventions. Using this approach, interventions need to produce mechanisms that interact congruently with their context to provide effective outcomes.

Program theories which have underpinned the C-M-O approach are central to 'realist evaluation' of complex interventions, providing ways to theorise 'plausible explanations of why certain interventions work or do not work in certain

circumstances' (Shearn et al., 2017, p. 2; Pawson, 2006; Pawson and Tilley, 1997). Realist evaluation is therefore important for theorising causal processes as well as outcomes, and is considered a pertinent theoretical and methodological approach to considering issues of complexity and the interaction of myriad causal factors (Shearn et al., 2017). Indeed, causal factors are a central tenant of realist evaluation and complex adaptive systems perspectives, and are therefore a uniquely placed approach to focus attention on the context of school-based MHWB interventions.

Westthorp (2012) notes a realist approach supports the principle that complexity is inherent in systems. Shearn et al. (2017) document the usefulness of a realist approach to exploring the contexts of social 'open' systems, which suggest realist evaluation is a foundation for exploring aforementioned gaps in the literature:

Social interventions are always played out in "open" settings where various contextual features at different social strata, such as individual demographics, interpersonal relationships, and political and economic structures, interact affecting the outcome (Clark, 2013a). This is not necessarily a linear relationship, whereby A leads to B, but more like a web of causal processes which, in combination, generate the outcomes (Sayer, 2000). Realist scholars call this web of causal processes leading to an outcome generative causation (Bhaskar, 2008). One of the aims of realist research is to make explicit the ways in which the various contexts interact and affect the outcomes of an intervention via the triggering or inhibiting of key mechanisms (Pawson & Tilley, 1997). (Shearn et al., 2017, p. 3)

Further to exploring the context of interventions, it is also important to consider developments in public health towards systems thinking. Rather than exploring MHWB provision on an intervention-level, recent developments which consider interventions as 'events in systems' (Hawe et al., 2009) is viewed as an appropriate way to explore these interventions in a way with context, effectiveness and sustainability in mind. Moore et al. (2019, p. 39) note 'where viewing interventions as events within complex social systems, intervention development must begin with an understanding of the nature of the problem in the systems where intervention will take place'.

Hawe et al.'s (2009) theorisation of interventions as events in systems drew connections between previous intervention failures with inattention to system-level theorising due the over-reliance on behavioural change theory, leading to 'weak prevention' in projects that pay insufficient attention to community and system considerations. Instead they offer an alternative method of theorising by adopting a 'dynamic, ecological, complex-systems approach' (2009, p. 268) which, if operationalised effectively, can correct the main theorised causes of weak prevention: poor community engagement and research methods, and ineffective theory. They note:

An ecological perspective recognizes that individuals are located within a broader social context (Stokols, 1996; Green and Kreuter, 1999). It is hard these days to find a health promotion program that does not claim to take an ecological approach. But for the most part ecological is simply taken to mean that the intervention has multiple strategies directed at multiple levels e.g., child + family + school or possibly, worker + workplace + community. Other than the idea that "the more levels, the better the effect", there is little theory put forward about how these levels impact the unfolding of the intervention or how they affect intervention outcomes. (Hawe et al., 2009, p. 269).

This thesis will utilise an 'events in systems' lens to explore how the different levels of the supra-system² 'impact the unfolding' of MHWB provision in the form of policy messages and the school-based interventions that result. Returning to the limitations outlined in the previous chapter, Keshavarz et al. (2010) note how the current evidence base for the long term sustainability of school-based health promotion is inhibited by researchers' and policymakers' lack of attention to conceiving schools as complex adaptive systems. If interventions are 'events' in systems, researchers need to consider what these systems look like, and whether they exhibit particular properties that might be useful when developing programmes and systems for longer term positive effects. Finally, how interventions interact with the context of the systems in which they are implemented is of paramount concern.

² Defined in the following chapter.

3.2.2. Primary schools as complex adaptive systems

Schools have increasingly been regarded as complex adaptive systems (Keshavarz et al., 2010). Based on their empirical data conducted in primary schools, the authors concluded that primary schools presented most key elements of complex adaptive systems. Keshavarz et al. (2010) however warn against uncritical application of complex adaptive systems theories to schools, particularly as it is an 'incomplete candidate' (2010, p. 1468) for applying complexity science (see below) to schools. Furthermore, due to differential definitions and applications, complex adaptive systems applications are viewed as a conceptual framework rather than a testable theory per se.

A complex adaptive systems lens is however ideal for studies focused on context. Though there arguably exists lack of clarity as to how exactly researchers might apply a complex adaptive systems perspective to school-based intervention, many regard complex adaptive systems as highly contextually specific (Anderson, 1999; Holland, 1998; Keshavarz et al., 2010; Zimmerman et al., 1998). Based on their empirical work, the authors noted that primary schools exhibited a number of properties that can be categorised as complex adaptive systems. Table 1 below maps a number of well-theorised properties of complex adaptive systems, with the authors' findings relative to primary schools:

Complex adaptive system property	Authors' findings relative to primary schools
Nested systems structure	Schools are 'nested' systems and contain 'sub-systems' within their structures. They are also themselves 'sub-systems' which form part of larger 'supra-systems' including local authorities and wider education systems.
Diversity of context	Diversity existed both between and within schools which created different 'operational contexts'. The authors reflect that this is where the implementation

	of policies may be differentially successful depending on unique school context.
Non-linearity and unpredictability	Different contexts affected the ways 'agents' within schools can function and how they can implement change at a local level. Importantly, here, the authors note 'although schools exhibit significant contextual differences in their priorities, structure and functioning, external expectations of schools (in terms outcomes achieved) are often very similar. As in the case of diversity, failure to recognise these contextual differences may lead to unrealistic expectations of what schools might achieve.' (Keshavarz et al., 2010, p. 1470).
Interactions	Schools demonstrate variable types of interaction practices including both formal and informal interactions with different forms
Information flow: dependent but autonomous	The 'flow' of information within schools and prioritisation of this information was variable. For instance, communications from the Department of Education were seen as higher priority and were more likely to be followed up quickly compared with communications outside the 'formal education network structure', i.e. the local health authority.
Feedback loops	Both formal and informal feedback loops from teachers, parents and pupils were used to inform practices
Rules	Schools have both formal rules and informal 'prevailing social norms and practices'. Although schools were bound formally by some rules, there existed flexibility in how they were applied at a local level.

Credit and blame attribution	Credit and blame attribution mechanisms substantially favoured improvement in 'the core education business of literacy and numeracy'
Continual adaptation	Schools continually adapted and innovated with new changes in their daily practice in response to new information and contextual conditions
Emergence	Schools' collective behaviour was dependent on its 'components, rules, interactions, information, values, context, time, and other systems' actions, and resources'

Table 1: Overview of Keshavarz et al.'s (2010) findings documenting key complex adaptive system properties of primary schools

From this table it is clear how contextual considerations are paramount when exploring how primary schools operate. The authors opine that understanding schools as complex adaptive systems can 'lead us to adopt more sophisticated approaches to the diffusion of new programs in school systems that account for the diverse, complex and context specific nature of individual school systems' (Keshavarz et al. 2010, p. 1467). Regarding the evidence presented in the previous chapter, a complex adaptive systems lens in the development of a conceptual framework for exploring school-based MHWB interventions from a contextually-relevant standpoint is therefore operationalised. Keshavarz et al. (2010) discuss how schools can be sub-systems within wider supra-systems.

This thesis applies consideration of schools as complex adaptive systems within larger educational supra-systems, and uses the concept to explore the development, transmission, enactment and experience of MHWB policy messages from a supra-systemic level to explore how MHWB interventions can be developed more effectively and sustainably with a contextual sensitivity.

3.2.3. Key features of context

The previous chapter highlighted the importance of context in the development of interventions. Defining context enables researchers to establish methodological

processes for understanding it in empirical research. Context has been defined as ‘a set of active and unique characteristics and circumstances that interact with, modify, facilitate or constrain intervention delivery and effects’ (Evans et al., 2019, p. 481). Damschroder et al. (2009) note how the majority of implementation theories which are contextually-focused use the label ‘context’ to refer to both unique factors surrounding an intervention as well as the specific setting in which it is delivered, and this definition applies well to explorations of how interventions interact with the context of systems in which they are implemented.

Pfadenhauer et al. (2015) note that definitions of context, and their boundaries with other similar and inter-related concepts are highly variable, noting that there needs to be work to improve their ‘conceptual maturity’. National Institute of Health Research (NIHR) guidance (Craig et al., 2018) for researchers interested in context responded to these extant conceptual limitations by synthesising a number of definitions of context. Where the authors agree with Pfadenhauer et al. (2015), they supported an expansive, combinatory approach to context, referring to ‘any feature of the circumstances in which an intervention is implemented that may interact with the intervention to produce variation in outcomes’.

Craig et al. (2018, p. 6) established the key features that could feature within a broad definition of context, including: (1) the physical location/ geographic setting of interventions; (2) cultural, social, political, historical and economic factors; (3) implementation factors (e.g. organisational, policy, funding influences); (4) demographic, epidemiological and socio-economic characteristics of implementers and those engaging with intervention; (5) legal and ethical factors, and; (6) the level of engagement of ‘targeted population’ with the intervention. The NIHR guidance (Craig et al., 2018) provides a useful array of factors to focus on within intervention research. The prevailing recommendation of the guidance is that researchers should ‘systematically incorporate considerations of context at all stages’ of the development and evaluation of public health interventions (Craig et al., 2018, p. 25). How this attention to context can be achieved is arguably still in a developmental stage, with various frameworks developed in recent years.

May et al. (2016, p. 1) note how context has been a problematic feature of intervention implementation as existing interventions seek to eliminate contextual factors, where these are the 'normal conditions into which interventions must be integrated if they are to be workable in practice'. Therefore, context has been considered by intervention researchers as problematic, and a shift in methodological and theoretical thinking needs to account for how best to understand these 'normal conditions' in order to design contextually-relevant interventions, rather than seeking to excluding them.

May et al. (2016) note that contexts are negotiated within wider organisations and systems, particularly by the actions and behaviours of 'participants' within interventions and intervention settings. The actions and behaviours are considered particularly important where participants are interacting with the 'normative and relational environment' (2016, p. 7) in which they inhabit. May et al. (2016) consider the implementation of interventions is non-linear, and that the context of intervention implementation includes various elements including feedback loops which 'continually shape and reshape implementation fidelity and outcomes' (2016, p. 8). May et al. (2016) and Keshavarz et al. (2010) therefore share similar conceptualisations regarding the importance of feedback loops for systems innovation, and that these processes are key to considerations of the context of systems.

The definitions of context presented above are considered a necessary starting point to consider methodological and theoretical ways of exploring contextual processes, particularly how the context of the complex adaptive systems in which interventions are implemented interact with the context of the intervention itself. Considering the literature presented in the previous chapter, the policy context for MHWB interventions pertains to the NIHR guidance (Craig et al., 2018), and is significant and under-theorised in the development and implementation of these interventions at the school level. However, context has been poorly-explored in relation to primary school-based MHWB interventions.

Within their paper, Greenhalgh and Papoutsi (2019) compare three different approaches to the 'scaling up' process of interventions in healthcare contexts (Figure

1): implementation science, complexity science and social science. Their approach, highlighting when each approach is likely relevant to particular studies, can be operationalised in the context of school-based MHWB. Though this project is not conducted at the stage of scale-up, it is interested in how MHWB intervention practices can be effectively sustained in schools, and theoretical insights into how complex adaptive systems function will help researchers identify the main systemic processes which enable this to occur and how these are moderated by the context of systems and their interventions.

Table 1| Different approaches to spread and scale-up in innovation and improvement

	Implementation science	Complexity science	Social science
Main focus	Evidence based interventions in practice	The evolving and emergent properties of systems	Social study of individuals, groups, and organisations
Contribution	Provides a concrete, planned approach to the delivery and study of spread and scale-up	Ecological view that emphasises the system's inherent unpredictability and need for adaptive change at multiple, interacting levels	Foregrounds patterns of social behaviour and interaction, professional beliefs and values, and organisational routines and structures
Key mechanisms of spread and scale-up	Uncertainty reduction, emphasis on fidelity and contextual influences	Emergent properties of an interacting system—self organisation, management of interdependencies, and sense making	Social, professional, and organisational influences that shape (and are shaped by) individual and collective action
Preferred methods for achieving spread and scale-up	Use structured, programmatic approaches to develop and replicate a complex intervention across multiple settings	Gain a rich understanding of the case in its historical, sociopolitical, and organisational context. Use multiple methods flexibly and adaptively. Expect surprises and handle them creatively. Develop individuals and organisations to be creative and resilient	Develop and apply theories of how individuals' behaviour and actions are influenced by interpersonal, material, organisational, professional, and other factors
Preferred methods for researching spread and scale-up	Metrics for measuring improvement (quantitatively) and systematic approach to exploring processes and mechanisms (qualitatively)	Case study approach using multiple qualitative and quantitative methods. Narrative can be used as a synthesising tool to capture complex chains of causation	Ethnography, interview based methods, and case narratives to provide insights into social interactions and contexts
How success is measured	Replication of a particular service model or approach in multiple contexts ("fidelity")	Nuanced narrative about what changed and why, including (where relevant) how the intervention was adapted or why it was abandoned	Theoretically informed and empirically justified explanations about human and organisational behaviour

Figure 1: Different approaches to spread and scale-up in innovation and improvement (Greenhalgh and Papousti, 2019)

Greenhalgh and Papousti (2019, p. 6) detail the differing focus of three approaches. This thesis will utilise the complexity science approach as theorised by the authors as it is the most relevant approach considering the thesis aims. These properties can be divided into three components – sensemaking, self-organisation and the management of interdependencies. Greenhalgh and Papousti (2019, p. 2) define these three components within their wider conceptualisation of the emergent properties of complex adaptive systems:

A set of things, people and processes that evolve dynamically and can be defined in terms of their relationships and interactions. Such systems are

characterised by uncertainty, unpredictability and emergence. They adapt through self-organisation (such as continuous adaptations initiated by frontline staff to allow them to complete tasks given local contingencies and availability of resources), attention to interdependencies (how the parts of the system fit together), and sensemaking (the process by which people, individually and collectively, assign meaning to experience and link it to action). (Greenhalgh and Papousti, 2019, p. 2)

3.2.4. Frameworks for understanding context

There exist a number of frameworks which have enabled researchers to examine context in the development and evaluation of interventions. This section will critically appraise key frameworks and provide the foundation for the thesis conceptual framework by identifying salient elements from these frameworks. These frameworks include the socio-ecological model (SEM) (McLeroy et al., 1988), the 'Context and Implementation of Complex Interventions' (CICI) (Pfadenhauer et al., 2017), the 'multi-layered contextual framework' (Daivadanam et al., 2019), the 'Consolidated Framework for Implementation Research' (CFIR) and May et al.'s (2016) adaptation of Normalisation Process Theory.

One of earlier models that can be applied to consider context was the SEM (McLeroy et al., 1988). Kilgus et al. (2015) note 'using a multi-tiered socio-ecological model that focuses on sociocultural structures and psychosocial environmental influences in addition to individual student factors, schools can expand the scope and impact of [mental health] practices to meet the needs of all students' (Kilgus et al., 2015, p. 163). Thus, the socio-ecological model can be feasibly used to conceptualise the complex educational system.

Kilgus et al. (2015) note the utility of adopting a socio-ecological perspective for developing effective school-based mental health interventions. In the context of school-based MHWB, as well as more widely in the realm of primary school-based health interventions, guidance as to how exactly researchers should focus on these multi-level influences and structures has been lacking, particularly at the intervention

development stage. Kilgus et al.'s (2015) focus on 'sociocultural structures and psychosocial environmental influences' can be developed further in the realm of primary school-based MHWB. As the literature reviewed in the previous chapter found, one of the key issues with MHWB intervention development in primary (and secondary) school settings has been how to develop the evidence base around longer-term sustainability of positive outcomes. Problems with sustainability were linked in the previous chapter to limited contextual focus.

The socio-ecological model is therefore viewed to marry effectively with a supra-system lens to enable theorising the context and implementation of mental health interventions across the primary school system. This thesis contends that the SEM is a useful model to 'map' out supra-systems due to its use of a layered approach to exploring differential influences on health. The SEM can be used in conjunction with analytical frameworks as it can provide foundation for investigation into the various levels within systems. Furthermore, the SEM can conceptually connect with a policy messages approach within a supra-system as it identifies key levels of influence: public policy, community, organisational, inter-personal, and individual. The subsequent section will overview why a policy messages framework is the principal approach used by the study.

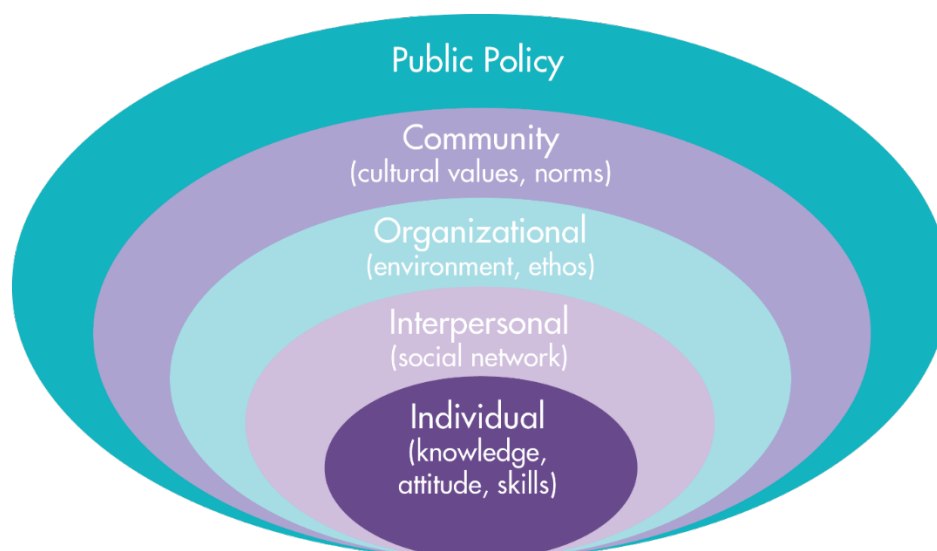


Figure 2: McLeroy et al.'s (1988) socio-ecological model

Though there has been an array of recently-developed frameworks to account more systematically and thoughtfully to context and its moderating effect within complex adaptive systems, these are generally relevant primarily to systems (bounded system of the school) rather than supra-systems (schools, local authorities and community organisations, regional consortia, governments). Indeed, Evans et al. (2019) note how there are limited theories, methods and frameworks for mapping contextual characteristics from a system-wide perspective. With this in mind, existing models such as the socio-ecological (McLeroy et al., 1988) map logically onto supra-systems, however require further detail at each level as to how researchers can theorise and map contextual characteristics. The SEM will be therefore used as a device for sampling, particularly useful in conceptualising the supra-system case, however it is arguably not a sufficient framework for exploring context due to its lack of detail.

Adding detail to the SEM, Daivadanam et al.'s (2019) 'multi-layered contextual framework' takes inspiration from Taplin et al. (2012). This framework also shares similarities with McLeroy et al.'s (1988) version of the socio-ecological model, adding contextually-relevant factors onto existing domains of influence on health, from national, local, organisational, community and individual perspectives. Figure 3 details the framework:

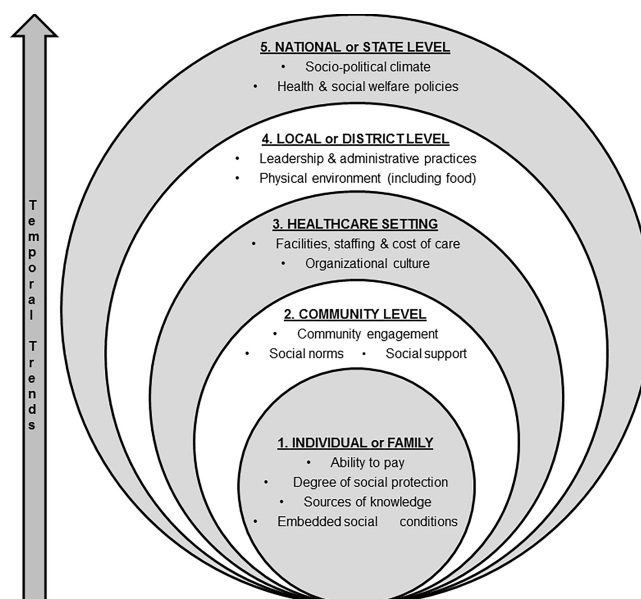


Figure 3: Daivadanam et al.'s (2019) 'multi-layered contextual framework', inspired by Taplin et al. (2012)

Though this framework is tailored to healthcare settings, it suggests a number of important factors for exploration relevant to the aims of this thesis, as well as the literature gaps identified in the previous chapter. For instance, the socio-political climate within the policy level of influence within complex adaptive systems is a key area of inquiry, as are the MHWB policies and policy messages considered previously. Furthermore, organisational culture of schools is considered an important area for development as it is an under-theorised area within primary school MHWB interventions. However, again, the contextual components forwarded in this framework could arguably be developed to account for the complexity of complex adaptive systems, and therefore additional frameworks are required to further elucidate how context can be mapped and explored more comprehensively.

Damschroder et al. (2009) developed the ‘Consolidated Framework for Implementation Research’ (CFIR) as a response to problems with intervention implementation across multiple contexts within health services research. The CFIR was developed based on an integration and unification of various existing constructs from key implementation theories. The CFIR has been used as a tool to identify contextual determinants (Waltz et al., 2019) and explore pre-implementation contexts within public health interventions (Ellis et al., 2020). Ellis et al. (2010, p. 2) note the CFIR is ‘useful in highlighting the multiple facets at play in creating the optimal pre-implementation context... The CFIR illuminates the similarities and differences between and across settings, highlighting the complexity of open system settings and the important need for pre-implementation work’.

The CFIR comprises five domains: (1) intervention characteristics; (2) outer setting; (3) inner setting; (4) characteristics of the individuals involved, and; (5) the process of implementation. Within these domains exist related constructs. Table 2 documents the authors’ definitions of each of these domains, adapted for relevance to the aims and objectives of this thesis:

CFIR domain	Description
Intervention characteristics	Interventions have both ‘core components’ and an ‘adaptable periphery’. Core components are essential

	elements of the intervention. The adaptable periphery refers to any adaptable 'elements, structures and systems' related to both intervention and organisation (setting) in which it is to be delivered. It is the peripheral components that can be modified based on the context of a setting.
Outer setting	The outer setting includes economic, social and political context encapsulating the organisation. Changes in the outer setting can influence implementation which are often mediated through changes in the inner setting.
Inner setting	Elements of structural, cultural and political contexts 'through which the implementation process will proceed'. The inner setting might be constructed by both tightly or loosely integrated sub-structures, comprised of both tangible and intangible 'structural characteristics, networks and communications, culture, climate, and readiness' which all relate and influence implementation'.
Individuals' characteristics	Individuals are considered agentic, whose choices can 'wield power and influence on others with predictable or unpredictable consequences for implementation' Individuals have professional, organisational, cultural, and individual 'mindsets, norms, interests, and affiliations'.
Process of implementation	Effective implementation is usually predicated on an active change process focused on both individual and organisational use of the intervention as designed. Individuals promoting change may originate from either inner or outer setting. Implementation may not occur sequentially and can form a non-linear process.

Table 2: Overview of key domains of the Consolidated Framework for Implementation Research (Damschroder et al., 2009)

Normalisation process theory (NPT) focuses on factors which facilitate and inhibit the regular implementation of interventions into 'everyday practice' (Murray et al., 2010).

NPT can be applied to school-based MHWB provision as it can help researchers identify salient factors which operate as either barriers or leverage points at the systemic level, rather than at the individual intervention level. NPT also applies due consideration to contextual factors including organisational context, social norms, structures, conventions and processes within groups (Murray et al., 2010).

Frameworks such as CICI, which will be outlined subsequently, provide more detail as to different elements of context, however NPT provides useful guidance for researchers interested in theorising contextual drivers for implementation efficacy. Murray et al. (2010) acclaim NPT as a useful bridging theory between existing public health frameworks which are over-reliant on systems level process to the detriment of individual-level factors and those which focus only on individual-level without due consideration to systemic factors. NPT is utilised in this project as it provides a combinatory framework for theorising contextual drivers, at both individual and systemic levels.

Furthermore, May et al. (2016) utilised the principles of Normalisation Process Theory (NPT) to focus attention on context, considering that feedback loops, a key characteristic of complex adaptive systems (Keshavarz et al., 2010) are constant adaptations which over time influence intervention implementation. Moreover, feedback loops are considered to be both temporally relevant and relevant across settings, highlighting the contextual-relevance of these loops. Normalisation Process Theory (NPT) is a useful theoretical process for exploring issues of context within the implementation of interventions within complex adaptive systems. May et al. (2016) delineate the main theoretical focuses of NPT. Table 3, adapted from May et al. (2016, p. 2) considers how these theoretical elements can be utilised for the aims of this thesis:

Theoretical focus	Description
Users' interactions with objects in implementation process	How interventions are operationalised, or enacted, by stakeholders including school staff

Agency within implementation processes	How specific intervention agents contribute to the implementation of MHWB interventions
Resource mobilisation in implementation processes	Analysis of the context detailing rules, norms, roles, material resources that impact on how intervention agents implement interventions

Table 3: Adaptation of May et al.'s (2016) development of Normalisation Process Theory

The 'CICI' framework (Pfadenhauer et al., 2017) was also produced in response to a dearth of health frameworks which incorporated context and implementation in regards to intervention development. The authors rationalised the conception of a new framework due to the link between the importance of the implementation of interventions in a given context and their effectiveness. Much of this literature has been reported in the previous chapter. The 'CICI' is a more generalised integrative framework for health interventions, however its provisions can be easily applied to primary school MHWB programmes. The authors consider intervention effectiveness, implementation and context to be 'inextricably linked' (2017, p. 2), and therefore a framework is necessary to document how these domains interact with one another.

Pfadenhauer et al.'s (2017) framework provides direction for researchers under three domains: context, implementation and setting. These domains are considered to interact with each other, and with the intervention in question. Contexts are delineated into the following: geographical; epidemiological; socio-cultural; socio-economic; ethical; legal and political. Implementation domains consist of process, strategy, theory and agents and outcomes. Setting refers to the physical environment of the intervention, and this is essentially an extension of the World Health Organisation's 'Healthy Settings' approach (World Health Organisation, 1986; World Health Organisation and WHO Global School Health Initiative, 1996). The 'CICI' framework (Figure 4) is considered a useful tool for drawing attention to the

specific elements of the supra- and sub-systemic context which interact with specific elements of implementation and physical settings to produce particular outcomes.

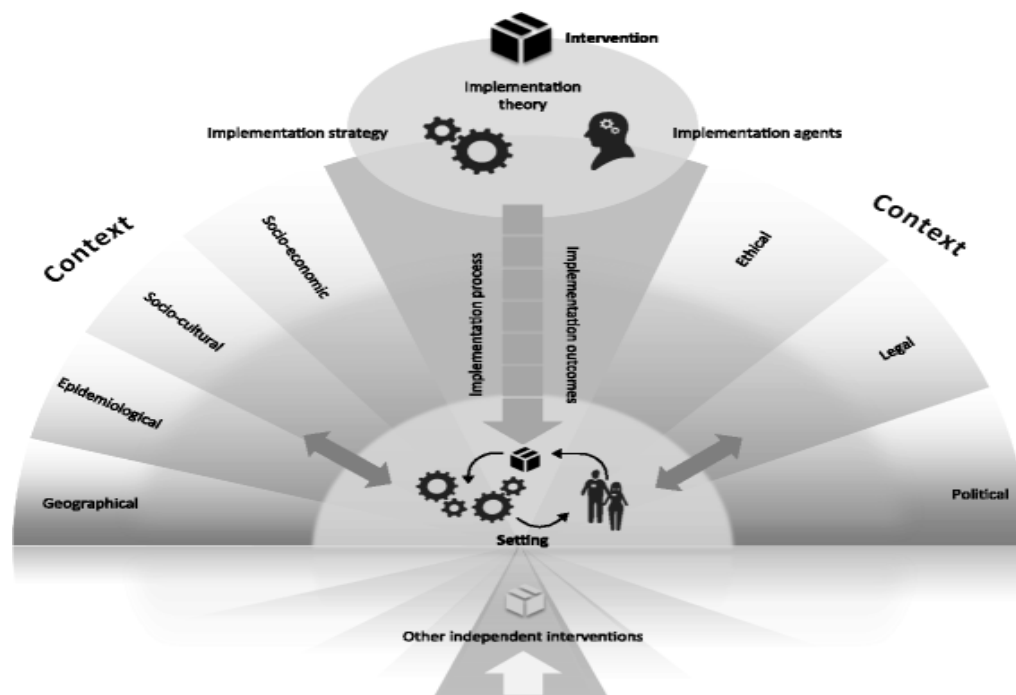


Figure 4: The Context and Implementation of Complex Interventions Framework (Pfadenhauer et al., 2017)

The frameworks presented above offer different approaches to understanding context, and vary in their strengths and limitations. Traditional frameworks such as McLeroy et al.'s (1988) socio-ecological model provide good foundation for mapping out and understanding complex adaptive systems such as educational supra-systems, and various authors have looked to modify this model in various contexts, including Daivadanam et al.'s (2019) development of the 'multi-layered contextual framework'. However, these models are arguably insufficiently detailed to attend to the complexity of 'open' systems.

Further detail as to how researchers can attend to contextual considerations at each level of a complex adaptive system is required. Frameworks including the 'Consolidated Framework for Implementation Research' (Damschroder et al., 2009) and May et al.'s (2016) adaptation of Normalisation Process Theory arguably achieve this, providing a more comprehensive focus, and specific examples, of how researchers can ask salient questions about the functioning of complex adaptive

systems. Furthermore, the ‘Context and Implementation of Complex Interventions’ (Pfadenhauer et al., 2017) framework usefully delineates various domains of context. The presentation of the conceptual framework will suggest that additional detail is required as to how researchers can utilise educational theory to explore contextual questions of how the context of complex adaptive systems affect the implementation of school-based MHWB interventions, adapting these health-focused frameworks for educational inquiry.

3.2.5. When should context be researched?

This section illustrates when in the development of interventions context should be considered, noting that arguably it should be a focus of attention prior to the intervention development stage. This section will present the INDEX study guidance, which outlined a clear action for attending to context in the development of interventions. This guidance built upon the Medical Research Council (MRC) guidance for developing and evaluating complex interventions, and the INDEX study guidance, which built upon the limitations of the original MRC approach.

The MRC guidance (Craig et al., 2008), initially published in 2000 and updated in 2008, listed four main elements of the development and evaluation process, as documented in Figure 5, below. The key stages are (1) development; (2) feasibility and piloting; (3) evaluation, and; (4) implementation.

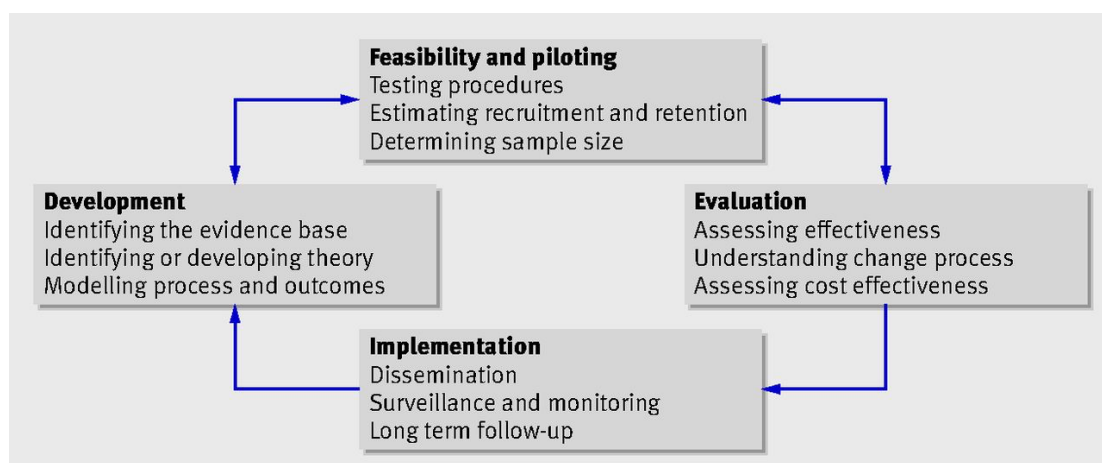


Figure 5: The four key stages of developing and evaluating complex interventions as outlined in the MRC guidance (Craig et al., 2008)

Where this guidance has been highly influential on the development and evaluation of complex interventions (O’Cathain et al., 2019), the aforementioned authors considered the developmental stage, namely the phase between idea generation and formal piloting, of the MRC guidance as only briefly conceptualised, requiring elaboration to help researchers in the developmental stages. O’Cathain et al.’s (2019) INDEX guidance looked to respond to these limitations, and identified and assessed various approaches to developing complex interventions, creating a clear framework for intervention development based on a synthesis of key approaches. O’Cathain et al. (2019) built on limitations in the original Medical Research Council guidance for developing complex interventions, first published in 2008 (Craig et al., 2008), to account for gaps in guidance for researchers within the intervention development stage.

The INDEX study was based on a review of existing salient frameworks for programme development and extensive consultation with a range of stakeholders involved within the field. Contextual focus was considered a key, absent element from the original guidance, and this framework development therefore provides an updated perspective on researchers’ attempts to attend effectively to context. Table 4 below documents salient excerpts from the INDEX guidance (O’Cathain et al., 2019, pp. 3-4), relevant to the aims and objectives of this thesis. O’Cathain et al. (2019) refer to these as ‘framework of actions for intervention development’. Though this thesis is not focused on MHWB intervention development, many of the below actions are salient for theorising the interactions between systemic contexts and the interventions which are ‘events’ within these systems.

Action	Application to thesis
Involve stakeholders, including those who will deliver, use and benefit from the intervention	This study foregrounds the perspectives of key stakeholders within the educational supra-system case-study ³ , including individuals from policy, regional and community organisations

³ See Chapter 4 for definition of the case-study.

	school staff (senior leadership staff, teaching and support staff), and pupils.
Draw on existing theories. Where relevant, draw on more than one existing theory or framework or theories, for example both organisational and psychological theories	This thesis draws on relevant theories from a range of fields, including complex adaptive systems theories, policy theories, sociological, educational and psychological concepts to explore how policy messages are developed, transmitted and enacted within the supra-system case study.
Understand context. Understand the context in which the intervention will be implemented. Context may include population and individuals; physical location or geographic setting; social, economic, cultural or political influences or factors affecting implementation, for example, organisation, funding and policy	Considerations of different supra-systemic context will be foregrounded within the analysis of empirical data (Chapters 5-7). The parameters of 'context' will defined according to the adjacent factors, as well as using the contextual dimensions of Pfadenhauer et al.'s (2017) 'CICI' framework, May et al.'s (2016) adaptation of NPT and the CFIR framework (Damschroder et al., 2009) as heuristic devices.
Pay attention to future implementation of the intervention in the real world. Understand facilitators and barriers to reaching the relevant population, future use of the intervention, 'scale up' and sustainability in real world contexts.	Facilitators and barriers to effective implementation of future MHWB interventions is built in, and explored, using the various theories listed in subsequent sections. The core aims of the thesis, as outlined above, are to ultimately theorise system-level facilitators and barriers to effective and sustainable intervention in different primary school settings.

Table 4: Adaptation of key elements of O’Cathain et al.’s (2019) ‘framework of actions for intervention development’ (from the INDEX study)

O’Cathain et al. (2019) define context as broader health, political and social care supra-systems in which interventions operate, and therefore the INDEX framework for intervention development is a useful starting point for the conceptual framework. Crucially, the INDEX guidance suggests that context should form part of the intervention development stage. Though the aims of this thesis is not to develop an intervention, it will utilise many of the recommendations presented in the guidance and frameworks from the previous sections to explore the context of supra-systems (Keshavarz et al., 2010) and MHWB interventions that are implemented in these systems. The next section details how this thesis will achieve these aims by presenting the conceptual framework.

3.3. Conceptual framework

This section will present the conceptual framework. The framework is centred around the exploration of the emergent properties of complex adaptive systems (Greenhalgh and Papoutsi, 2019), and comprises key elements of the frameworks critically appraised. The framework is presented in three parts based on the central areas of system emergence of interest to the thesis, interdependencies, sensemaking and self-organisation, which provide the overarching definitional foundation for attending to the limitations in the extant literature. The section also introduces the main methodological foundation for the system-wide perspective on school-based MHWB provision, namely the development, transmission, enactment and experience of policy messages. Specific theories for exploring the emergent properties of complex adaptive systems in a policy messages lens are presented in the final sub-section.

3.3.1. Combined framework for exploring system emergence

Returning briefly to Keshavarz et al. (2010) and their concepts of primary schools as complex adaptive systems, this thesis looks to focus specifically on the property of emergence. Emergence has been selected as a focus of inquiry for several reasons: firstly, because it provides a platform to explore the context of systems, which will be unpacked further below. Contextual frameworks such as the CFIR (Damschroder et al., 2009) and May et al.’s (2016) adaptation of Normalisation Process Theory

facilitate this exploration, and key elements from these frameworks are outlined below with key areas of inquiry which can be explored using theories.

Secondly, emergence as defined by Keshavarz et al. (2010, p. 1472), notably how schools' collective functioning was dependent on 'components, rules, interactions, information, values, context, time, and other systems' actions, and resources' seems an ideal overarching framework by which to explore context. This is not to say that other key elements of their identified properties of schools as complex adaptive systems are not relevant, such as information flow, adaptation and feedback loops are not important. In fact, using Greenhalgh and Papousti's (2019) three emergent properties of complex adaptive systems – interdependencies, self-organisation and sensemaking – arguably encompass many of these key functions. Therefore, system emergence will be explored and unpacked using these three key properties. This section will present a combined conceptual framework on how emergence can be explored, and the following section will detail how specifically these key areas of inquiry can be developed using a range of theories, including both individual and organisational, as suggested by O'Cathain et al. (2019).

The previous section noted that existing frameworks do not always provide adequate coverage across systemic domains of influence, organisational and interpersonal considerations (Murray et al., 2010). The combined framework presented below therefore attends to the context of both system and intervention, and was developed to ensure adequate coverage exists to explore context across the domains of influence on MHWB provision. The Consolidated Framework for Implementation Research (CFIR) (Damschroder et al., 2009) provides a solid foundation for conceptual work at all levels of the supra-system of school-based MHWB provision, and therefore provides a response to extant limitations of frameworks. The key dimensions of the CFIR can form the basis of key contextual considerations at system, school and interpersonal/intra-personal, or individual, levels.

Alongside the CFIR, key elements from the Context and Implementation of Complex Interventions (CICI) (Pfadenhauer et al., 2017) framework were included to provide explicit ideas for a wide range of contextual factors that might impact on MHWB intervention implementation. Where the CFIR is a thorough framework for mapping

context, arguably the CICI provides more potential avenues for exploration, and therefore their broader framework is included to ensure a thorough attention to context can be facilitated from a conceptual and methodological perspective. The CICI framework will be used within the empirical data analysis to categorise and explore the prominence and impact of contextual influences on the development, transmission and enactment of MHWB policy messages. Finally, May et al.'s (2016) adaptation of Normalisation Process Theory, particularly the domains of 'agency', 'users' interactions' and 'resource mobilisation' within implementation processes add further insight into how context can be explored, and similarly to the other frameworks combined above, offer coverage across systemic, organisational and inter/intra-personal levels.

Tables 5-7 provide a visual representation of the combined framework, with separate detail regarding each of the three properties of emergence (Greenhalgh and Papousti, 2019). The following combined framework utilises elements from the CFIR (Damschroder et al., 2009), NPT (May et al., 2016) and CICI (Pfadenhauer et al., 2017). The following tables present each salient element of the frameworks with examples of inquiry areas which will subsequently influence the research design (Chapter 4) and data collection and analysis (Chapters 5-7).

3.3.1.1. *Interdependencies*

Greenhalgh and Papousti (2019, p. 2) refer to interdependencies as 'how the parts of the system fit together'. To achieve understanding of these interdependencies, a number of inquiry areas can be established. Examples of key questions include how the 'outer' and 'inner' settings (Damschroder et al., 2009) of systems work together to influence the implementation of MHWB interventions, how the context of the outer setting impacts on the development, transmission and enactment of policy messages, and how intervention agents and organisations within supra-systems enact agency and influence (May et al., 2016) over the development, transmission and enactment of policy messages, subsequently exploring how this may affect intervention implementation.

Framework element	Examples of inquiry areas
<p><i>Process of implementation</i> (Damschroder et al., 2009)</p> <p>Individuals promoting change may originate from either inner or outer setting. Implementation may not occur sequentially and can form a non-linear process.</p>	<p>How do the outer and inner settings of the system work together to influence the implementation of school-based MHWB interventions?</p>
<p><i>Outer setting</i> (Damschroder et al., 2009)</p> <p>The outer setting includes economic, social and political context encapsulating the organisation. Changes in the outer setting can influence implementation which are often mediated through changes in the inner setting.</p>	<p>How does the context of the outer setting affect the development and transmission of policy messages?</p> <p>How does the context of the outer setting affect the enactment of policy messages MHWB intervention implementation?</p>
<p><i>Inner setting</i> (Damschroder et al., 2009)</p> <p>Elements of structural, cultural and political contexts 'through which the implementation process will proceed'. The inner setting might be constructed by both tightly or loosely integrated sub-structures, comprised of both tangible and intangible 'structural characteristics, networks and communications, culture, climate, and readiness' which all relate and influence implementation'.</p>	<p>How does the context of the inner setting affect the enactment of policy messages via MHWB intervention implementation?</p> <p>How does the context of the inner setting affect how pupils engage with and experience MHWB interventions?</p>
<p><i>Contextual domains</i> (Pfadenhauer et al., 2017)</p>	<p>What contexts outlined by Pfadenhauer et al. (2017) are particularly important in the development and transmission of policy messages?</p>

**Table 5: Combined framework for exploring system emergence
(interdependencies)**

3.3.1.2. Sensemaking

Sensemaking, or 'the process by which people, individually and collectively, assign meaning to experience and link it to action' (Greenhalgh and Papousti, 2019, p. 2), can be explored using the below framework components. Again, examples of inquiry

areas for design, data collection and analysis are provided in Table 6. Key areas of inquiry include how intervention agents at different levels of the system exert their influence (Damschroder et al., 2009) and agency (May et al., 2016) over the development, transmission, enactment and experience of policy messages, and how their professional, organisational, cultural and individual mindsets, norms, interests and affiliations (Damschroder et al., 2009) might impact on this process.

Framework component	Examples of inquiry areas
<p><i>Individuals' characteristics</i> (Damschroder et al., 2009)</p> <p>Individuals are considered agentic, whose choices can 'wield power and influence on others with predictable or unpredictable consequences for implementation'</p> <p>Individuals have professional, organisational, cultural, and individual 'mindsets, norms, interests, and affiliations'.</p>	<p>How do intervention agents at different levels of the system exert their influence over the development, transmission, enactment and experience of policy messages?</p> <p>How do intervention agents' professional, organisational, cultural and individual mindsets, norms, interests and affiliations affect this process?</p>
<p><i>Agency within implementation processes</i> (May et al., 2016)</p> <p>How intervention agents contribute to the implementation of MHWB interventions</p>	<p>How do intervention agents and organisations within supra-systems enact agency and influence over the development, transmission and enactment of policy messages? How does this affect intervention implementation?</p>
<p><i>Contextual domains</i> (Pfadenhauer et al., 2017)</p>	<p>What contexts outlined by Pfadenhauer et al. (2017) are particularly important in the development, transmission, enactment and experience of policy messages?</p>

Table 6: Combined framework for exploring system emergence (sensemaking)

3.3.1.3. Self-organisation

The final emergent property, self-organisation, is defined as 'continuous adaptations initiated by frontline staff to allow them to complete tasks given local contingencies and availability of resources' (Greenhalgh and Papousti, 2019, p. 2). Relevant areas for inquiry from the above frameworks include identifying key contextual factors that detail 'resource mobilisation' (May et al., 2016) within the implementation process, as well as elucidating the rules, norms, roles and material resources impacting on implementation. Also, it is important to investigate, based on the limitations

presented in the previous chapter, what contextual factors preclude or promote the sustained, routine implementation of interventions, and whether theorisations regarding effectiveness can be made as a result.

Outline	Examples of inquiry areas
<p><i>Resource mobilisation in implementation processes</i> (May et al., 2016)</p> <p>Analysis of the context detailing rules, norms, roles, material resources that impact on how intervention agents implement MHWB interventions</p>	<p>What are the key contextual factors that detail the resource mobilisation in intervention implementation? What are the rules, norms, roles and material resources impacting on implementation?</p>
<p><i>Users' interactions with objects in implementation process</i> (May et al., 2016)</p> <p>How interventions are operationalised, or enacted, by stakeholders including school staff</p>	<p>What contextual factors preclude or promote the sustained, routine implementation of MHWB interventions? How do these factors affect the effectiveness of interventions?</p>
<p>Contextual domains (Pfadenhauer et al., 2017)</p>	<p>What contexts outlined by Pfadenhauer et al. (2017) are particularly important in the enactment of policy messages?</p>

Table 7: Combined framework for exploring system emergence (self-organisation)

The following section will introduce the overarching framework for exploring the context of school-based MHWB interventions and the emergent properties of the complex adaptive systems in which they are implemented.

3.3.2. Development, transmission, enactment and experience of policy messages

This thesis explores the development, transmission, enactment and experience of MHWB policy messages. This framework has been chosen as a way to frame the research design, data collection and analysis, due to its affordances and flexibility as a methodological, conceptual and theoretical tool. A policy messages-focused approach is an ideal overarching framework to explore the context and implementation of MHWB interventions from a systemic perspective, as it allows the researcher to theorise the very origin of interventions in the form of policy messages. A policy messages lens is considered congruent with the various elements of frameworks presented and appraised above.

Moreover, a policy messages lens can help researchers trace the development, transmission and enactment, from policy to school level, of these messages, and explore how they result in specific school level intervention practices. This lens is also applicable and relevant considering the school-based MHWB policy context surveyed in Chapter 2, specifically increasing policy and societal interest and awareness in MHWB provision in primary schools. It operates as a flexible overarching framework which can operate as an organiser for a range of different theory at organisational and individual-levels (O’Cathain et al., 2019). It is also highly applicable to a systems lens, particularly Greenhalgh and Papousti’s (2019) definition of the emergent properties of complex adaptive systems. The following sub-sections will outline key theories for exploring system emergence in the development, transmission, enactment and experience of policy messages.

In exploring the development, transmission, enactment and experience of MHWB policy messages, considering the emergent properties of complex adaptive systems is highly relevant. The contribution of this approach has clear complementary properties – providing an ecological view of a system at multiple, interacting levels. Interdependencies are particularly important exploring the strength and influence of messages and which messages are prioritised within the system and subsequently transmitted to schools. Sensemaking is critical to understanding how policy messages are developed, the conceptual and theoretical foundations of these, why certain messages are transmitted to schools, and how schools assign meaning to experience of these messages and subsequently enact these in intervention practice. Sensemaking also has relevance at the pupil experience and engagement level. Self-organisation (Greenhalgh and Papousti, 2019) can be operationalised to explore how school staff continually adapt and prioritise based on local context, or ‘contingencies’ and ‘resources’, and which messages are routinely sustained.

3.3.2.1. *Development and transmission: exploring the outer setting of complex adaptive systems*

Damschroder et al. (2009) refer to the ‘outer setting’ of systems, which includes the political, social and economic context encapsulating organisations. As noted in the previous section, the authors note that changes in the outer setting are likely to

influence organisational level implementation, in this case, schools, which are then enacted at the school level. Bruns et al. (2019) suggest that though the importance of the outer setting on intervention implementation is highly recognised, empirical work exploring how key factors and contexts within outer settings influence implementation is limited. Exploring the development and transmission of messages therefore serves as a device to explore key contextual determinants that influence school-based MHWB intervention practices from the outer setting.

This thesis utilises Bernstein's (2000) model of transmission context to explore the development and transmission of MHWB policy messages. Bernstein's (2000) transmission context provides a useful analytical lens to establish the strength and cohesiveness of policy messages through the various elements of the model, particularly the concepts of the 'classification-framing dyad' and 'recognition and realisation rules', will be explored to categorise and analyse the strength of policy messages developed by key stakeholders in public policy, regional and community level organisations (McLeroy et al., 1988). Classification refers to how some forms of knowledge and pedagogic styles are privileged over others (Larson and Marsh, 2014; Leow, 2011). A 'strong' classification signifies a tightly-bounded privileging of knowledge and pedagogic style, where 'contents are well insulated from each other by strong boundaries' (Bernstein, 1975, pp. 88-89). 'Framing' is defined as 'the locus of control over the selection, sequencing, pacing and criteria of the knowledge to be acquired' (Bernstein, 2000, p. 99).

Strongly-classified policy messages are therefore those in which there is clear cohesion and agreement between policymakers. The strength of classification of these messages are moderated by the extent to which policy-making stakeholders developing messages have and exert control (framing) over what it is to be communicated to schools regarding MHWB intervention practice within educational supra-systems. The classification-framing dyad is considered a relevant lens to explore the contextual origins of MHWB interventions. Bernstein's (2000) transmission context is therefore a key analytical lens used to explore interdependencies, or how the levels of the systems fit together to produce particular MHWB policy messages, and specific 'outcomes' in the form of particularly intervention practices at the school level.

The key question derived from the key areas of inquiry presented previously is:

How does the context of the outer setting affect the development and transmission of policy messages, and how does the outer setting influence the inner setting and the enactment of messages?

For instance, using Bernstein's (2000) transmission context to explore the development and transmission of policy messages, messages that are strongly-classified and strongly-framed, are considered more likely to create a cohesive interdependency between various levels of the system. Furthermore, the extent to which MHWB policy messages are 'strong' and can thus create a cohesive interdependency, can also be analysed under the umbrella of 'policy hyperactivity' (Clarke, 2012; Dunleavy, 1987). Policy hyperactivity is considered the 'multiple policy demands and expectations' (Leow et al., 2014, p. 992) on schools by policymakers. Likewise, Ball et al. (2011b, p. 627) refer to how educational policies which manifest as a "collection code" of unconnected bits and pieces, with no principle of integration' cannot be effectively integrated into school systems. The extent to which hyperactivity exists within the interdependencies of the system, and how this affects the development, transmission and enactment of policy messages is considered a key analytical framework. Hyperactivity is seen as an opposing force to strongly-classified and framed policy messages, and is considered a strong force undermining effective transmission.

The key area of inquiry for exploring sensemaking (Greenhalgh and Papousti, 2019) processes is:

How do intervention agents at different levels of the supra-system exert their influence over the development, transmission, enactment and experience of policy messages?

Various sociological, educational and psychological theories can be used to explore how various stakeholders across the levels of the educational supra-system exert influence and agency over the development, transmission, enactment and experience of policy messages. 'Action' within the parameters of this thesis will refer to the various forms of the policy messages process, whether the development and

transmission by key individuals at the policy, regional and community levels, the enactment by schools, or pupils' experience of schools' intervention practices.

Some educational theories have already been presented in Chapter 2, which complement a sensemaking approach. For instance, Ecclestone's (2012) notion of 'conceptual confusion'. In the previous chapter, this theory was considered as a critique of the current school-based MHWB intervention evidence base. Conceptual confusion is defined by Ecclestone as how conflicting agendas of different interest groups 'compete to define a problem and offer particular solutions' (Ecclestone, 2012, p. 469). This theory is viewed as a useful way of helping researchers further explore the classification-framing dyad and transmission context (Bernstein, 2000) and how these complementary lenses can be operationalised to theorise the development and transmission of policy messages within complex supra-systems.

Moreover, the Foucauldian (1972) notions of subjectivities and discourses are applied to the empirical data analysis. These are also broadly 'sensemaking'-specific concepts that can provide a more nuanced understanding of how MHWB policy messages are shaped, the agendas that prevail and dominate the construction of messages, and who these originate from. Cumming et al. (2013, p. 224) refer to a Foucauldian reading of 'discourses' as 'codified patterns for naming and discussing things' that can both depict and create 'the objects and subjects of which they speak' (Foucault et al., 1972, p. 49). Discourses can be hegemonic, having a 'decisive influence on a specific practice' (Dahlberg et al., 2007, p. 31) and within this, either repressive, creating a climate where alternative ways of thinking and practising are impeded, or productive. 'Subjectivities' are the constructed 'ways of being' (Cumming et al., 2013, p. 224, citing Dahlberg et al., 2007, p. 23) which contribute to the shaping of either hegemonic or productive discourses.

Singh et al. (2013) provide justification for focusing substantial efforts on the actions of 'mid-level' policy actors. These actors are 'crucial to the work of policy interpretation and translation because they are engaged in elaborating the condensed codes of policy texts to an imagined logic of teachers' practical work' (2013, p. 465). These actors are conceptualised similarly to Ball et al.'s (2011) 'outsiders', as these are often local authority stakeholders, particularly those with a

fair amount of contact with schools and their policy enactments (for example healthy schools coordinators), however Singh et al.'s (2013) definition provides a little more detail as to their positionality – in the authors' minds mid-level actors have a key role in the translation of policy messages to the real-world context of pedagogic work at the school level. These actors can therefore 'regulate which aspects of policy texts are privileged and/or "filtered out" (Singh et al., 2013, p. 465). These actors would be situated between policy and school levels, but would feature as part of the 'outer setting' (Damschroder et al., 2009).

3.3.2.2. *Enactment: exploring the inner setting of schools' intervention practices*

In their CFIR framework, Damschroder et al. (2009) also refer to the 'inner setting'. The inner setting comprises of elements of structural, cultural and political contexts 'through which the implementation process will proceed'. The inner setting might be constructed by both tightly or loosely integrated sub-structures, comprised of both tangible and intangible 'structural characteristics, networks and communications, culture, climate, and readiness which all interrelate and influence implementation'. (2009, p. 5). Where the classification-framing dyad (Bernstein, 2000) was used to explore the development and transmission of policy messages, the notions of 'realisation' and 'recognition' rules are particularly useful when surveying whether these messages have been effective and enacted authentically within the 'inner' setting (Damschroder et al., 2009). For instance, Leow (2011, pp. 316-7) notes:

In order for a policy reader to implement a new policy effectively, [they] needs to possess both the recognition and realisation rules of the new policy. If the reader has acquired appropriate recognition rules of the policy, this will be reflected in his/her knowledge about the policy (i.e. what the policy is about and what is required of the policy reader). Similarly, the reader's acquisition of the realisation rules will be evident in how effectively he/she is able to navigate the demands of the policy and produce an appropriate response to these demands (e.g. how a teacher might incorporate the demands of a new policy into his/her pedagogical practice).

Explorations of schools' enactments of policy messages will consider the extent to which school level stakeholders possess both recognition and realisation rules, as well as the extent to which the development and transmission of MHWB policy messages moderates the clarity of these rules. One hypothesis the study will explore considers that the extent to which schools possess recognition and realisation rules, and the context of these rules, is ultimately likely to affect the way they implement MHWB interventions and the specific selective and universal interventions they select to implement.

Additionally, the lens of policy enactments (Ball et al., 2011; Braun et al., 2011) will be used to consider how schools essentially transfer the messages that they have received and interpreted from stakeholders at the public policy, regional and community levels of the supra-system, to their specific context. A policy enactment lens deliberates that instead of mandating particular action, policies create conditions where options for decisions are narrowed or altered (Ball, 1994). The 'enactment' of policies is considered a creative process undertaken by schools where they often invoke different responses to 'cope' (Braun et al. 2011, p. 586) with policies from higher levels of educational supra-systems. Braun et al. (2011) outline various forms of enactment including the 'creative processes of interpretation and translation', including the 'recontextualisation' from abstracted policy ideas to concrete, pedagogical practices. These processes will therefore frame sections of the school level data analysis, as outlined in Chapter 6.

The enactment element of the combinatory policy messages framework produced for this thesis therefore seeks to explore the contextual processes by which MHWB interventions are selected, developed, adapted and implemented by primary schools, and how the context of school systems interact with the contexts of the 'higher' supra-system levels of public policy, regional and community organisations involved in the development and transmission of policy messages.

The key area of inquiry for exploring system interdependencies at this stage of the policy messages lens is:

How does the context of the outer setting affect the enactment of policy messages and schools' implementation of interventions?

A further useful lens for interdependencies considering the literature overviewed in Chapter 2, notably the growing demands on schools to promote the MHWB of pupils through policy messages, is 'obligatory choice'. The notion of obligatory choice (Bennett et al., 2009; Sianou-Kyrgiou and Tsiplakides, 2009) can be applied to the inter-organisational structure of school-based MHWB provision. Obligatory choice has been referred to as how personal agency is constrained and choice is 'essentially rationalised and accepted in relation to wider circumstances' (Mannay, 2019).

Moreover, Sianou-Kyrgiou and Tsiplakides (2009) applied this concept to working-class students' choice of higher education institutions, where although preferences across a range of different types of institution was common, ultimate decisions were made based on economic restrictions such as the cost of tuition prevailed. In the context of this study, obligatory choice is applied to the school level data in particular, and can provide further insights into the extent to which schools can exercise agency over their intervention practices, and to what extent prevailing transmitted policy messages are sustained and sufficiently disruptive, or washed out of school systems.

Returning to Bernstein's (2000) transmission context, considering policy enactments, the focus of the school level chapter, cohesive interdependencies are likely to be where schools have possession of the recognition and realisation rules for how to respond to MHWB policy messages, and are able to enact these in a way congruent with policymakers, and other stakeholders at the policy, regional and community levels of the supra-system. This lens is particularly important as it provides a nuanced insight into how different contexts interact with one another to produce particular intervention outcomes. Conversely, theorised issues with interventions, relative perhaps to perceptions of effectiveness and their potential for sustainability, can be considered in relation to the contextual origins of MHWB policy messages, providing a wider systemic perspective on schools' intervention practices.

Bonawitz et al. (2020) note how ‘champions of healthcare change efforts’ are key influencers on intervention outcomes, however existing research has focused primarily on the strategies and resources available to ‘champions’. Indeed, frameworks for exploring context presented above have referred to the importance of resource mobilisation (May et al., 2016), and though undoubtedly considered important for exploring context and implementation of interventions in social systems, arguably neglect the importance of intervention agents personal characteristics that contribute towards effective implementation (Bonawitz et al., 2020). Moreover, Damschroder et al.'s (2009) CFIR does focus attention towards individuals’ characteristics, and based on these elements.

The key area of inquiry relative to sensemaking processes within the enactment process is:

How does the context of the inner setting, namely intervention agents’ professional, organisational, cultural and individual mindsets, norms, interests and affiliations affect the enactment of policy messages and the implementation of interventions?

As noted in the previous chapter, research into the conceptualisation of MHWB policy messages in England suggests policy has taken influence from the pedagogical perspective of ‘character education’ (Brown and Carr, 2019), which entails developing the cognition, character and behaviour of the individual learner, and is often conceptually connected with individual-level narratives of ‘grit’ and ‘resilience’. Similarly, previous research has highlighted the strategy of individualising responsibility (Brunila and Ryyänen, 2017; Schrecker, 2013) at governmental level in public health contexts, an umbrella under which character education can be situated.

Ultimately this perspective centralises responsibility on individuals for supporting their own mental health through the development of character, and has been critiqued by educationalists including Brown and Carr (2019) for reinforcing ‘ideal’ and ‘deviant’ learner dichotomies through mental health narratives, particularly where UK government documents conflate ‘mental health’ and ‘behaviour’ (Department for Education, 2018). These two concepts are particularly relevant to

how policymakers and other stakeholders in organisations ‘higher’ up the supra-system make sense of what schools should be doing in their intervention practice, and how specific philosophies of education might lead to sensemaking processes regarding intervention strategy.

Many papers in the educational literature discuss, theorise and analyse the role of teachers on the various educational processes that take place within schools. A specific focus on the positionality of teachers, namely ‘goals, knowledge, beliefs, strategies and other normative frames of reference’ (Banks, 1996, cited in Rehm and Allison, 2006, p. 261) has been explored in relation to how these factors (also incorporating for example biographies, personalities, values, objectives, perceptions, attitudes) significantly affect learning experiences of students (Rehm and Allison, 2006). Similarly, Kirk and MacDonald (2001) in the context of teachers’ roles within a process of curriculum change, note:

We suggest that the teachers’ authoritative voice within [Health and Physical Education] projects was located within the local context of implementation of the reforms, and was based on their intimate knowledge of their students, their colleagues, their school structures and resources available to them. It was from this position that teachers made an invaluable contribution to the curriculum reform process. (Kirk and MacDonald, 2001, p. 552)

Kirk and MacDonald’s (2001) ideas serve as a way to further understand the sensemaking processes. Positionality will be used to explore how teachers’ experiences, knowledge and ‘voice’ affect the enactment of policy messages process into intervention practices. Building on the importance of teacher positionality as an effective component of school-based MHWB provision, and though situated in a different setting to school-based MHWB provision, a study conducted by Niebieszczanski et al. (2016) focused on mental health nurses’ perceptions of hope-focused interventions for recovering patients in secure units. Their analysis of qualitative data found that nurses’ values were significantly important in their role to develop hope in recovery in patients, and that two main elements were theorised by participants as critical to the process of fostering hope in patients: ‘being the intervention’ and ‘doing reasonable hope’ (2016, p. 425).

As part of the notion of 'being the intervention', nurses' personalities and behaviours were conceived as interventions within themselves. Moreover, nurses' genuine belief and hope in patients' recoveries was mandatory; with one participant noting 'service users can see if you don't actually believe that' (Niebieszczanski et al., 2016, p. 425). Other contextual moderating factors for this intervention included 'journeying with the person', a concept that will be explored in relation to learning support assistants' relationships and journeys with pupils selected for further intervention. These insights are considered potentially interesting ways of exploring sensemaking processes within complex adaptive educational systems, as the concepts of how school staff can 'be' the intervention in MHWB provision has been relatively unexplored in the literature. Staff are often considered agents within intervention logic models or theories of change, which are often intervention-specific and insufficiently attend to context and systems thinking.

This thesis also draws theoretical inspiration from the psychological literature, specifically affective events theory (AET) (Weiss and Cropanzano, 1996). AET was originally conceived by Weiss and Cropanzano (1996) as an organisational psychological theory, the foundation of which theorised that affective behaviours (including for instance the operationalisation of emotional labour, empathy, understanding etc.) exhibited by staff in a workplace was founded on their affective experiences in that workplace. This thesis extends this conception to affective experiences outside the workplace, and how this can affect teacher positionality.

AET is therefore operationalised as an integrative element within the concept of 'teacher positionality'. As Leow et al. (2014, p. 995) write, 'where policies have an explicit corporeal dimension, policy implementation becomes moderated by principals' and teachers' own biographies, health practices, embodiment, work priorities, and what they consider is the remit of schooling'. Furthermore, Kirk and Macdonald's (2011, p. 562) conceptualisation of teacher positionality features the elements of 'personal discursive history, accumulated professional and personal experience, professional identity and subject alliances'. Analysis of the empirical data will utilise AET in particular to explain the biographies and personal experiences of key staff within school systems who use these experiences as a lever to 'be the intervention' (Niebieszczanski et al., 2016, p. 433).

To explore self-organisation processes, the following area of inquiry is presented:

What are the key contextual factors that detail the ‘resource mobilisation’ (rules, norms, roles and material resources) in intervention implementation? What other contextual factors impact on intervention implementation?

One of the key dimensions of complexity science is the idea of self-organisation. Chandler et al. (2016) conceive self-organisation as imperative in understanding the introduction and diffusion of changes in systems. The principles of self-organising systems can be applied to Rütten and Gelius' (2011) conceptualisation of structuration, notably the dynamism within systems for structural change, based around ‘collective actions of the agents’ within these, where potential for systems-level change is not ‘centrally determined’ (Moore et al., 2019, p. 25). Moore et al. (2019, p. 34) write:

Complex social systems have a strong propensity toward self-organization (Chandler et al., 2016); resistance to the introduction of a disruptive change is to be expected. However, perceptions of any new way of working are likely to change over time as the system begins to generate feedback loops. These may be positive reinforcing, leading to increasingly positive perceptions and adoption, or balancing, leading to reductions in use or discontinuance.

Sriprakash (2011) notes that Bernstein’s (2000) concept of recontextualisation, as noted in this chapter, one of the key elements of a policy messages lens, ‘encourages us to think about the ways in which pedagogic discourses are produced or constituted through the relocation, refocus, and relation of other discourses’ (2011, p. 524), demarcating ‘official’ recontextualising discourses, or ‘fields’, as those that are state-sponsored, with the ‘pedagogic’ field, in the context of this study, focused on school discourses, operations, narratives and perspectives. Likewise, Singh (2002) provides a helpful definition of recontextualisation also, noting that ‘through recontextualisation, a discourse is moved from its original site of production to another site, where it is altered as it is related to other discourses. The recontextualised discourse no longer resembles the original because it has been pedagogised or converted into pedagogic discourse’ (Singh, 2002, p. 573).

This study uses Singh (2002) and Sriprakash's (2011) interpretations of Bernstein's (2000) recontextualisation fields theory, where official and pedagogic fields are not viewed as separate; rather the study will focus on how the official field influences the pedagogic through the recontextualisation of MHWB policy messages into intervention practices. Locating policy messages for primary school MHWB within the 'original site of production' in the official field of policy, and tracing how these are recontextualised as it relates to other discourse, or in this specific study, the context and implementation of supra-systems, is a central focus for the project.

3.3.2.3. *Pupils' experiences of schools' intervention practices*

The final element of the policy messages approach is how primary school pupils engage with and experience the MHWB interventions that schools select, develop, adapt and implement. Two core analytical lenses will be used to theorise how the policy messages developed and transmitted at the PRC level eventually 'reach' pupils via schools' recontextualisation (Bernstein, 2000), sensemaking and self-organisation (Greenhalgh and Papousti, 2019), which ones are strongest and reach sufficient systemic 'disruption', and which ones are filtered out of school systems.

The following key area of inquiry, encapsulating interdependencies, sensemaking and self-organisation is:

How does the context of the inner setting affect how pupils engage with and experience MHWB interventions? Does the context of the outer setting also influence their experiences?

Consideration of pupil-level data specifically focuses on how MHWB 'emotional spaces' function as a practice of 'liminality' (Turner, 1967). Atkinson and Robson (2012, p. 1350) note that:

Liminality aims to disorient through a ritualised withdrawal from the habits and routines of the everyday social order and the dissolution of existing structures of thought, action and identity... Liminality thus entails an effective separation

from the everyday routines and entry into an alternative social encounter in which different rules, different values, and different relations apply.

Atkinson and Robson (2012, p. 1350) differentiate between various forms of 'liminality', though they consider all forms as 'periods of separation'. Turnerian liminality was originally considered as a seismic event where transformation occurs as a single period, however more recent applications of these ideas consider liminality as a flexible period of separation, where short but repeated events occur. Atkinson and Robson (2012) note that a flexible reading of liminality allows for consideration of a more complex, nuanced and gradual shift in identity. This thesis employs contemporary concepts of liminality as they are considered more relevant for exploring intervention practices within emotional spaces in school contexts, where 'existing structures of thought, action and identity' perhaps undergo transformation for short periods, with relationships between staff and pupils in these spaces 'resetting' in traditional academic spaces.

Another key element within liminality is the idea that 'communitas', a community of trust and equality, can be developed (Turner, 1967), through the erosion of 'everyday hierarchies' (Atkinson and Robson 2012, p. 1351). The authors note that 'communitas reflects a shift in the relative balance between the different modes of power exercised compared with other spaces'. Therefore, within the analysis and presentation of data in this chapter, liminality as a concept will be tested. It will be considered whether effective intervention practices, and the emotional spaces they inhabit, are predicated on the presence of liminality, where traditional, hierarchical relationships between staff and pupils are subverted in favour of new 'structures of thought, action and identity' characterised by communitas.

This thesis delineates liminality into three sub-concepts: firstly the dissolution of rules and expectations (Atkinson and Robson, 2012), secondly the erosion of hierarchies in favour of developing 'communitas', what Turner (1967) considers a 'sociality based on equality and trust' (Atkinson and Robson 2012, p. 1351, citing Turner, 1967), both of the above concepts in differing ways used to explore how emotional spaces are conceptually and physically distanced from academic spaces such as classrooms.

Thirdly, viewing MHWB interventions as ‘transformative’ spaces (Atkinson and Robson, 2012, p. 1354). Viewing emotional spaces as liminal in these three ways can help provide an analytical lens to explore to what extent, and how, schools’ recontextualisation practices create effective emotional spaces and by proxy, MHWB interventions. Liminality and *communitas* are therefore employed as analytical concepts to theorise system-level leverage points from pupils’ perceptions, considered a useful device for both school- and systemic innovations in future intervention development studies.

The above analytical lenses are ways to consider how and why certain MHWB interventions practices are less successful and favourable from pupils’ perceptions. This is fundamental to the thesis’ aims, namely to explore how MHWB interventions can be developed from a contextually-sensitive, sustainability focus from a systems-level perspective. A crucial element of this, arguably missing from the literature synthesised previously, is in-depth exploration of pupils’ experiences, and perceptions, of key leverage points and barriers to effectiveness and sustainability.

3.4. Conclusion and research questions

Public health responses to the ineffective implementation and a lack of evidence for long-term sustainability of many school-based MHWB interventions have taken the form of conceptualising such interventions as ‘events in systems’ (Hawe et al., 2009). Rather than developing, scaling and evaluating interventions as separate entities discrete from the social systems in which they are introduced and implemented, attention has been drawn towards the ways in which interventions are situated within wider sub- and supra-systems (Keshavarz et al., 2010), and particularly how health programmes interact with and potentially disrupt existing system contexts (for example processes, dynamics, agents, interactions) and effectively sustain themselves within these, or whether the context ultimately rejects and removes the innovation out of the system. Therefore, focus on the prevailing systemic context and its interactions with health interventions is a key focus for study and analysis, where developing the sustainability of health interventions are

concerned. These principles can and are applied to primary school-based MHWB within the research design.

The next chapter will subsequently outline the research design, beginning with the ontological and epistemological position, methodology and sampling, methods, analysis and ethical considerations. Table 8, below, presents the study research questions, and how they have been developed from the conceptual framework focused on the emergent properties of complex adaptive systems (Greenhalgh and Papousti, 2019) and the various contextual frameworks outlined above.

The thesis aim, which conceptually connects the research questions, is as follows:

To explore the development, transmission and enactment of policy messages in complex adaptive systems, and theorise the impact of these processes on the implementation and pupil experiences of MHWB interventions in Welsh primary schools

Research Question	Emergent property	Areas for contextual inquiry
What policy messages are developed by policy, regional and community stakeholders for school-based MHWB and how are these transmitted to schools at the community-school interface?	Interdependencies (Greenhalgh and Papousti, 2019) Sensemaking (Greenhalgh and Papousti, 2019)	How does the context of the outer setting affect the development and transmission of policy messages? Adapted from Damschroder et al. (2009) How do intervention agents at the outer setting levels of the supra-system exert their influence over the development, transmission, enactment and experience of policy messages? Adapted from May et al. (2016)
How do school staff enact policy messages and how do these processes affect the implementation of MHWB intervention in schools?	Interdependencies (Greenhalgh and Papousti, 2019)	How does the context of the outer setting affect the inner setting, namely enactment of policy messages and schools' implementation of interventions? Adapted from Damschroder et al. (2009) How does the context of the inner setting, namely intervention

	<p>Sensemaking (Greenhalgh and Papoutsi, 2019)</p> <p>Self-organisation (Greenhalgh and Papoutsi, 2019)</p>	<p>agents' professional, organisational, cultural and individual mindsets, norms, interests and affiliations affect the enactment of policy messages and the implementation of interventions? Adapted from Damschroder et al. (2009)</p> <p>What are the key contextual factors that detail the 'resource mobilisation' (rules, norms, roles and material resources) in intervention implementation? What other contextual factors impact on intervention implementation? Adapted from Damschroder et al. (2009) and May et al. (2016)</p>
<p>How do pupils experience the practices of universal and selective school-based MHWB interventions in light of schools' recontextualisation processes?</p>	<p>Interdependencies, sensemaking and self-organisation (Greenhalgh and Papoutsi, 2019)</p>	<p>How does the context of the inner setting affect how pupils engage with and experience MHWB interventions? Does the context of the outer setting also influence their experiences? Adapted from Damschroder et al. (2009)</p>

Table 8: Presentation of study research questions and areas for contextual inquiry from conceptual framework

Chapter 4: Research Design

4.1. Introduction

This chapter provides an overview of the research design. It will first outline and justify the use of a critical realist approach to ontology and epistemology, before introducing the supra-system case study methodology. The sampling frame utilising the socio-ecological model (McLeroy et al., 1988) will define the case. The chapter will subsequently detail the sampling, recruitment and subsequent characteristics of the sample. The qualitative method will be outlined, justified and data generated from this approach will be critically appraised. Key ethical considerations will be examined. The final sections will detail the analysis and researcher reflexivity.

4.2. Ontology and epistemology: Critical realism

This project adopts the ontological and epistemological position of critical realism. Critical realism was founded by Bhaskar (1975). Bhaskar's 'return to realism' (Pilgrim, 2014, p. 5) was realised through a stratification of reality into three domains, within an 'open' systems ontology (Bhaskar, 1989; Oliver, 2012): the real, the actual, and the empirical. At the real level, generative mechanisms (for example parts or products of a social system or structure) with causal power generate events at the actual, which may be subsequently experienced by groups or individuals at the empirical level (Plant, 2005). It may only be the case therefore that individuals' or groups' experiences are observable at the empirical level; however, critical realists propose that events can also occur at the actual level, whether observed or not by humans, hence critical realism's ontological focus with a view of an objective reality existing at the actual. Fletcher (2017) adopts the iceberg metaphor to explain the stratified domains: the real is underwater and unobservable, the actual spans both unobservable and observable, and the empirical is the sole dimension fully above water, always observed and interpreted by individuals.

Critical realism sought to position itself as a philosophy of science which would not fall foul of a 'relativist dead end' (Houston, 2001, p. 849; Hammersley, 1992), a

critique of much 'radical' post-positivism, which holds that attempts at interpreting the real are fallible and thus no claims to an objective reality can be made. Logical positivism on the other hand is viewed by critical realists as incompatible with social science for being uncritical and extraneous to social context, and for often claiming objectivity of truth without exploring the interpretivist and relativist foundations on which individual accounts often underpin such research (Oliver, 2012).

This particular philosophy of science has also been criticised for claiming to be value-free, for example objective, theory-free, fact-laden and uninfluenced by the researcher. Critical realism does in fact view research as value-laden, where the researcher cannot escape actively participating and influencing the research process (Bhaskar, 1998; Pilgrim, 2014), however, the focus is on a reality 'present beyond empirical validation or actual events, witnessed or unwitnessed' (Pilgrim, 2014, p. 7). An assumption that research is value-laden therefore requires a commitment to researcher reflexivity also present in relativist approaches to research.

Critical realism has been therefore posited as a third-way, still partially retaining positivism's approach to an ontological objective reality, that is, it views the existence of one, however it 'does not commit one to the view that absolute knowledge of the social world is possible' (Scott, 2005, p. 633). Reality is therefore 'mind independent' (Bhaskar, 1975), operating externally to individuals' social constructions. May (2011, p. 11) notes how 'if researchers simply content themselves with studying everyday social life, such as conversations and interactions between people, this will distract them from an investigation of the underlying mechanisms which make those possible in the first instance (Collier, 1994; Sayer, 2000). The task of researchers within this tradition is to uncover the structures of social relations in order to understand why we have the policies and practices we do'.

In the context of this study, critical realism therefore can bridge the ontological and epistemological gap between the importance of individual accounts, experiences and positionality and a focus on how the sensemaking, interdependencies and self-organising emergent properties of supra-systems produce specific outcomes in the forms of school level MHWB intervention practices. It can aid exploration of the contextual systemic conditions, underpinned by a search for 'demi-regularities' (May

2011, p. 12), within the emergent properties of systems (Greenhalgh and Papousti, 2019) which occur at the real, how they produce 'events' (Hawe et al., 2009) in the form of how policy messages are developed, transmitted and enacted from policy to school levels at the actual, and the constructions that describe these, at the empirical level. Critical realism can help facilitate this approach as it lends itself to a complex adaptive systems approach as outlined in the previous chapter, which focuses on the complexity of open systems.

Critical realism is considered a relevant philosophical approach to explore systems-level 'demi-regularities' (or tendencies) (May 2011, p. 12), and is therefore a useful lens to complement the study aims, namely to explore the development, transmission and enactment of MHWB policy messages in education supra-systems, and how they affect intervention practices and pupil experience in primary schools. Critical realism can enable researchers to progress analysis beyond individual-level accounts in favour of exploring how the processes and emergent properties of systems, namely how policy messages are developed and transmitted, how they produce particular effects, in this case the enactment of messages into school level intervention practice and pupils' experiences of these.

The utilisation of an open systems approach is therefore compatible with the exploration of complexity and context as detailed previously, and critical realism is an ideal way to answer the study research questions as outlined at the end of the previous chapter, which are focused on the systemic-level processes of how policy messages are developed and transmitted (Q. 1), enacted (Q. 2) and experienced (Q. 3), however they focus on identifying these events at the real and actual levels through exploring stakeholders' social constructions at the epistemological level. Critical realism is also an effective and compatible ontology and epistemology to underpin the exploration of the thesis aims using a case-study methodology. The next section will outline how a supra-system case study has various levels, which are identified using McLeroy et al.'s (1988) socio-ecological model.

4.3. Methodology

This thesis utilises the instrumental case study as outlined by Stake (1995), and will take Yin's (2009, 1994) perspective on the purpose of conducting a case study. This section will define the case study and introduce the instrumental case study as a relevant and applicable type relative to the aims of the thesis. It will then justify and compare this approach with alternative case study perspectives, and interrogate the limitations reflecting on how the design will respond to and mitigate these.

4.3.1. Why the case study?

This thesis will use a 'supra-system' (Keshavarz et al., 2010) case study methodology. Crowe et al. (2011, p. 1) note the case study is used to generate an in-depth, multidimensional perspective on 'a complex issue in its real life context'. Moreover, the case study is a way to understand and theorise complexities in different societal interests; this methodology can help researchers highlight salient social processes and dynamics 'through explicit acknowledgement of different perspectives on a single event' (Perry, 2011, p. 225). A case study approach is therefore pertinent for the exploration of how different supra-system stakeholders differentially understand how MHWB policy messages are developed, transmitted and enacted, and how these impact on schools' intervention practices.

As well as being compatible with a critical realist ontology and epistemology, the case study methodology is congruent with a complex adaptive systems theoretical position (Hetherington, 2013). For instance, Anderson et al. (2005, p. 671) note that, though traditional case-study designs, which often consider organisations as 'machine-like', are ill-equipped to facilitate exploration of complex adaptive systems, some case study designs, if underpinned by complexity science, provide a useful methodological tool for organisational study (Crabtree et al., 2001; Stake, 1995; Yin, 1994). Complexity-focused case study designs should therefore consider systems as dynamic, adapting and social (Anderson et al. 2005), with a 'never ending process of change' (Merry, 1995, p. 33). Most importantly, Anderson et al. (2005, p. 672) note 'a key to understanding the system as an integrated whole thus lies in understanding the patterns of relationships among its agents'.

This case study approach therefore will facilitate exploration and understanding of these patterns of relationships among agents. To understand the complex adaptive educational supra-system of interest as a whole means understanding the patterns of relationships between agents within and across different levels of the socio-ecological model. These ideas clearly converge with the emergent properties identified in the previous chapter, also drawn from complexity science. Greenhalgh and Papousti's (2019) definitions of self-organisation, sensemaking and interdependencies are clearly relevant as a theoretical tool to understand these patterns. A clearly defined and bounded multi-layered system of study using the socio-ecological model will enable this understanding to occur. Case studies are frequently used for producing rich, in-depth qualitative data (Harrison et al., 2017).

Stake (1995) outlined three broad types of cases: intrinsic, instrumental and collective. An intrinsic case study documents the uniqueness of the phenomena of a particular 'case', demonstrating how it is different from any others. An instrumental case study usually utilises one case to broadly appreciate a phenomena (Crowe et al., 2011). A collective case study involves a multi case approach to elicit wider understanding of a specific issue.

4.3.2. Instrumental approach

This thesis utilises the instrumental approach, identifying a specific, bounded case study to generate theoretical propositions about the how school-based MHWB policy messages are developed, transmitted and enacted, and how these messages affect intervention practices and pupil experiences of interventions. This thesis adopts Yin's (2009, 1994) purpose for the case study. Though it adopts Stake's (1995) definition of the instrumental case study, in terms of the ultimate purpose of the case study, it follows from Yin. Particularly relevant following Yin's perspective is that case studies are empirically-driven with key outcomes of interest: firstly that the study focuses on 'a single phenomena within its real-life context', and secondly that the boundaries between the phenomena of interest and its context are not manifest (Crowe et al., 2011, p. 4). Returning to the previous chapter, the current intervention literature focused on complexity and context, and the view that interventions cannot be

separated from their context, and that this enforced separation has been problematic in terms of achieving effectiveness in 'real-world' settings, suggests the approach forwarded by Yin (2009, 1994) to case studies is an ideal fit for this qualitative study.

4.3.3. Limitations of the case study

Both critics and proponents of case study research, which specifically relate to the instrumental approach chosen for this thesis, principally acknowledge that the methodology is largely non-generalisable (Perry, 2011). This thesis adopts the position of Mitchell (1983) which positions the instrumental case study as a 'detailed examination of an event (or series of events) which the analyst believes exhibits (or exhibit) the operation of some identified general principle' (Perry, 2011, p. 223).

Thus, the thesis makes no assumptions as to the generalisability of the claims made of the qualitative data from this specific supra-system case, however the findings are considered as potentially useful as a 'general principle' for future MHWB intervention development work underpinned by a complex adaptive systems approach, both in the context of Welsh education and further afield. Additionally, Simons (2009) opines the case study is useful for developing existing knowledge around a topic, particularly to inform practice and establish the value of a case to achieve this. This lens therefore connects logically to the thesis aims, notably developing the MHWB intervention evidence base by exploring the context of systems and their interventions, contributing new theoretical insights from a systems approach.

4.4. Sampling frame: Defining the supra-system case

This section will outline how the primary supra-system (Keshavarz et al., 2010) case was defined as well as how the regional, community and school (sub-system cases) were established.

4.4.1. Public policy (national) case: Welsh education system

The supra-system case is conceptualised at the national (Wales) level and follows from Keshavarz et al.'s (2010) concept of 'supra' systems housing a number of 'sub'

systems. Therefore, the primary (supra-system) case itself is the Welsh education system. The secondary case (sub-systems) within the primary case includes the regional case, or regional level of provision. The Welsh education system is divided up into five educational consortia, which cover the main regions. Within the regional case, community-level sub-cases can be established, which are bounded by the five local authorities within each regional case. Figure 6 maps the primary, secondary and sub-cases. The socio-ecological model (McLeroy et al., 1988), with the additional, modified layer of regional influences on provision, was used to draw broad boundaries for the supra-system case. The levels of influence on schools' MHWB intervention practices were considered to be at the public policy, community and organisational (school) levels. These categories were used as the foundation for defining the case (Figure 6; Table 9).

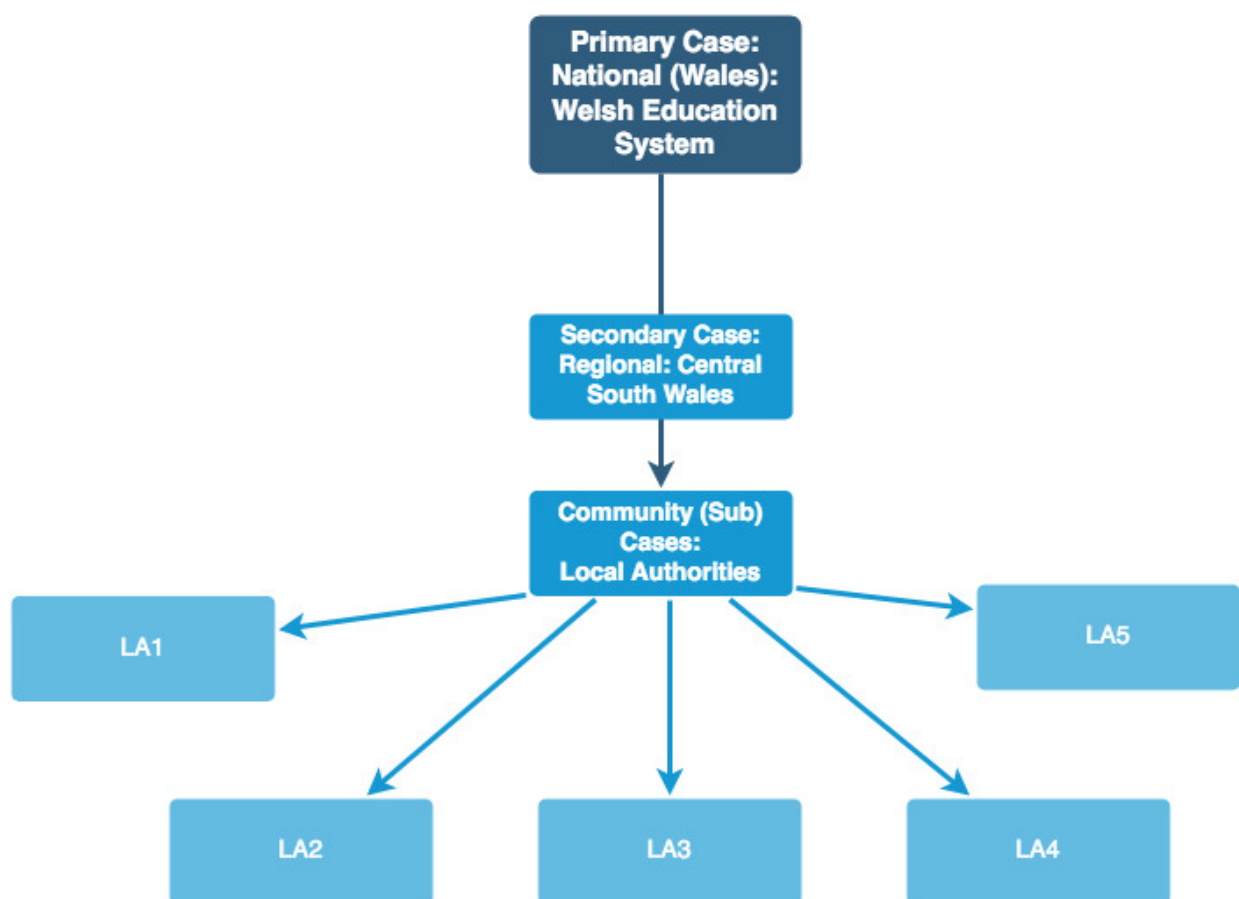


Figure 6: Diagrammatic representation of the primary case, secondary and sub cases.

Domain of the SEM	Potential groups, organisations and participants
Public policy: National (All Wales) organisations and Government	National-level stakeholders responsible for, and with experience of, designing policy, commissioning, resourcing, delivering and funding primary-school MHWB interventions e.g. Estyn, Welsh Government, CAMHS, Public Health Wales stakeholders involved in mental health and wellbeing at national levels
Regional: Central South Wales	Educational consortia (EC) stakeholders, Public Health Wales stakeholders involved in mental health and wellbeing at regional levels
Community (also including Regional organisations): Local Authorities	Local authority (LA) stakeholders for example Healthy Schools co-ordinators, clinical stakeholders involved in school-based MHWB provision, community organisations.
School (organisational): Schools in each of the Local Authorities	School staff (senior leadership teams; Key Stage 2 (Year 5 and 6) class teachers, support staff) involved in the selection and implementation of MHWB interventions; school pupils

Table 9: Defining the supra-system case: Using the socio-ecological model to identify potential groups, organisations and participants

To construct a bounded case, the case levels, from the regional, community and school levels of the supra-system, were firstly identified using existing educational structures, for example Educational Consortia and Local Authorities. This was an initial way to start to ‘map’ out these levels of the supra-system as a facilitator for the purposive, and subsequent respondent-driven (stakeholders from policy, regional and community levels) and exploratory variable (school level) sampling.

4.4.2. Regional case: Educational Consortia

Central South Wales (CSW) is one of four educational consortia (EC) in Wales; the other three include North Wales, South West and Mid Wales, and South East Wales. CSW was purposively selected for this study due to its geographic proximity to the

research office, and the two LAs selected were based on the greatest stratification of FSM% score and population density, two key contextual variables based on the research literature as potential moderators for the differential implementation of MHWB interventions, across the five LAs within CSW. Table 10 documents average FSM scores (% of pupils eligible) for CSW and its LAs, with standard deviations calculated against the national average (LA; EC) and EC average (LA).

Sampling level	FSM %	Standard deviation cf. EC average. (%)	Standard deviation cf. National average (%)	Population density: (persons per KM²), mid-year 2015
National				
Wales	16.82	-1.84	-	149.5
Regional				
Central South Wales	18.66	-	1.84	
Local Authority/Community				
Local Authority 1	21.55	2.89	4.73	532.3
Local Authority 2	21.39	2.73	4.57	559.7
Local Authority 3	19.29	0.63	2.47	2534.9
Local Authority 4	18.12	-0.54	1.3	566.7
Local Authority 5	11.73	-6.93	-5.09	385.4

Table 10: Breakdown of national, regional and community groupings by FSM% and population density variables

4.4.3. Community cases: Local Authorities

Population density was selected as a proxy measure of urban/rural classification, and was included as this study is also interested in potential contextual differences in the exploration of MHWB intervention practices in primary schools. The primary intention, however, was to select one high and one low FSM% LA. For this reason, LA3 was selected as the high FSM% LA, due to its similar FSM% compared with

LA1, and the adjustments are displayed by the highlighted fields, above. Incidentally, LA3 scores high on population density figures, and represents a larger split with LA5 compared with LA1, as displayed in Table 10. LAs 1 and 5 can both be considered rural LAs: with 532.3 and 385.4 persons per square KM respectively. LA3 represents a much higher densely populated, urban LA with 2534.9 persons per square KM. This adjustment, from LA1 to LA3 ensured that both LAs selected, LA3 and LA5, could allow stratification for both socio-economic and socio-geographic context, as well as other contextual factors at the school level.

4.4.4. School cases

LA5 contains 45 primary schools, seven of which are Welsh medium, with a total number of pupils of 12,399. The average number of pupils for each school is 275. LA3 contains 98 primary schools, 15 of which are Welsh medium, one dual medium. The average number of pupils for each school is 342. FSM% entitlement for both LAs is documented above.

4.5. Sampling and recruitment

This section details the sampling strategy for the supra-system case and will follow a logical order from the 'outer' setting (Damschroder et al., 2009) of the supra-system (public policy, regional and community) stakeholders, which was underpinned by a combination of purposive and chain referral, or 'snowball' sampling (Naderifar et al., 2017), to the 'inner' setting (schools). Schools were sampled using exploratory variable sampling.

4.5.1. Public policy, regional and community level

4.5.1.1. *Sampling*

The work above detailing how the case was defined and bounded as one supra-system ensured that key stakeholders from the public policy level could be identified. The same sampling techniques were carried out for stakeholders from the policy,

regional and community levels of the case. The diagram below (Figure 7) documents the sampling process for policy, regional and community stakeholders, and is a visual representation of the order in which these stakeholders were mapped, located and recruited. A combination of purposive and respondent-driven sampling was used. Purposive sampling was used initially and was based upon existing knowledge of key stakeholders within the case. At the end of each interview participants were asked whether they were willing and/or would be able to identify any individuals who they believed potentially relevant to the focus of the project based on their networks of provision related to MHWB interventions in primary schools.

The majority of subsequent sampling at this level was achieved as a result of snowball, or 'chain referral' sampling. The intended sample size for this stakeholder group was approximately $n=10-15$, or as many as required to reach data saturation. Saturation is considered by Saunders et al. (2018) as a criterion for discontinuing data collection and analysis, and has been contemplated as a 'rule' (Denny, 2009; Saunders et al., 2018; Sparkes et al., 2012) for qualitative research. However, the concept of saturation should be engaged with critically and has been utilised differently across the terrain of qualitative research (Saunders et al., 2018).

Saunders et al. (2018) provide four types of saturation: theoretical, inductive thematic, a priori thematic and data. Data saturation refers to 'the degree to which new data repeat what was expressed in previous data' (2018, p. 1897). Table 11, below, shows that in total 16 participants were recruited and interviewed. Based on concurrent interviews and analysis, reflecting on the data produced after 10 interviews, data saturation was considered not to exist. Notably, after 15, it was considered this process was achieved, and a final interview confirmed this. Data saturation coincided with inductive thematic saturation (Saunders et al., 2018), where no new codes and themes were produced after 16 interviews.

Chain-referral sampling is considered by Naderifar et al. (2017, p. 3) as a purposeful method of 'gathering information to access specific groups of people'. This sampling is a method of convenience sampling and is particularly relevant where difficulties exist accessing the relevant population. Therefore, this sampling strategy is considered congruent with a supra-system case study approach, where both known

and unknown individuals exist, many of whom are likely difficult to approach without chain-referral. One of the potential concerns of the chain-referral method is its affordances of anonymity and confidentiality. Naderifar et al. (2017) note how this should be guaranteed by the researcher, and due to this study interviewing stakeholders who are potentially identifiable by their job titles, particularly those at the higher levels of the supra-system, further randomisation of titles was undertaken to mitigate these concerns.

The diagram documents the process of sampling and recruiting relevant stakeholders to the study. Stakeholders were deemed relevant if they had an active role within the supra-system in policymaking or the recontextualisation of policy direction into specific school-based mental health intervention strategies. The below map of relevant stakeholders (full sample) was created by two main phases. The first phase covered the identification of key known stakeholders using a departmental contact. This contact had developed several networks with a range of supra-systemic stakeholders within their role as head of a school-based health network. The second phase was to use chain-referral sampling to develop a map of key individuals and organisations who are involved in the development, transmission and enactment of MHWB policy messages in primary schools.

The diagram is constructed as follows: national-level participants and organisations feature at the top in green; regional-level (stakeholders from organisations with remit for areas larger than local authority) are placed underneath and are in yellow; finally local authority stakeholders, in blue, of the figure marked by either 'LA1' (local authority 1) or 'LA2' (local authority 2). Participants who worked across both LAs but were not considered 'regional' for the purposes of the supra-system definitions are marked 'LA1 LA2'.

Stakeholders operating across several LAs as well as those working at the regional levels of the supra-system are considered 'mid-level policy actors' (Singh et al., 2013). These are defined as participants without policy-making remit but with substantial policy translation roles, ultimately responsible for enacting or recontextualising policy imperatives in the form of communicating intervention strategy to schools. These are referred to also in the data chapters as 'school

collaborators' as the majority of these work closely with schools on a regular basis compared with the stakeholders who have a more broad-brush influence.

Figure 7, below, contains a number of diagrammatic features: connections between stakeholders are illustrated in one of two ways: a blue arrow, which symbolises direct contact made between the researcher and the stakeholder, via the departmental contact. Pink arrows detail stakeholders contacted via chain-referral sampling, at the base of the arrow details the participant who suggested making contact, designated the 'snowballing' stakeholder.

4.5.1.2. *Recruitment*

National, EC and LA-level (policy, regional and community) stakeholders were contacted initially to ascertain potential interest in interview participation. Formal invitations were subsequently sent out to interested stakeholders via e-mail with participant packs. Participant packs included information sheets and consent forms, with a freepost return envelope. Information sheets included project information, confidentiality procedures and processes for anonymisation.

Stakeholder information sheets (see appendix A) detailed the project aims and objectives, and what participants might be expected to contribute to the interviews and consent and withdraw processes. They also contained contact details of the researcher, research centre and Cardiff University School of Social Sciences School Research Ethics Committee application number and details, as well as the project funder. Formal invitations were followed up where requested by a telephone call or further e-mail dialogue, where potential participants were given the opportunity to informally discuss the research project and its stipulations. Once initial, informed consent was received, a location and time for the interviews was arranged.

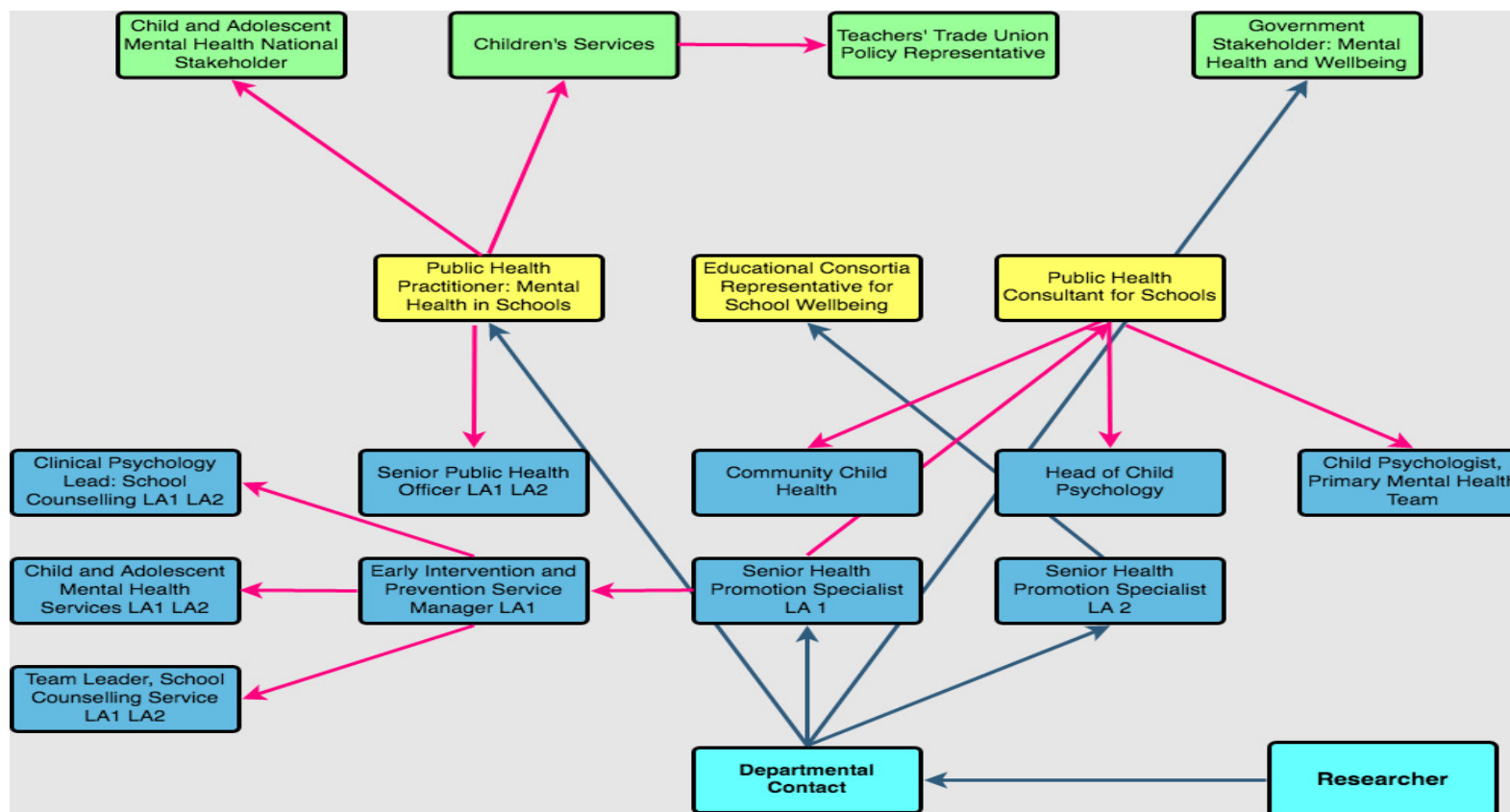


Figure 7: Sampling network for policy, regional and community stakeholders, documenting chain-referral and purposive sampling processes

Key: Green: policy stakeholders; Yellow: regional; Blue: community; Pink arrow: chain-referral sampling; Blue arrow: purposive sampling

4.5.1.3. *Sample characteristics*

ID	Participant pseudonym	Gender	Job role	Length of time in role	Type of interview
PRC_001	Billy	F	School Health Promotion Specialist, Local Authority (Community/Local)	Not provided	1:1
PRC_002	Elaine	F	School Health Promotion Specialist (Community/Local)	6 years	1:1
PRC_003	Geraint	M	Early Intervention and Prevention Services (Community/Local)	7 years	1:1
PRC_004	Laura	F	School Health Promotion Team Leader (Community/Local)	6 years	1:1
PRC_005	Sarah	F	Public Health Consultant for Schools (Regional)	5 years, 3 months	1:1
PRC_006	Jane	F	Team Leader, School Counselling Service (Community/Local)	4 months ⁴	Paired
PRC_007	Ian	M	Clinical Psychologist Lead, School Counselling Service (Community/Local)	2 years 3 months	
PRC_008	Kirsty	F	Community Child Health Team Leader (Community/Local)	2 years	Group
PRC_009	Justine	F	CAMHS Representative (Community/Local)	3 years, 2 months	
PRC_010	Emma	F	Child Psychologist, Primary Mental Health Team (Community/Local)	4 years	

⁴ 8 years 4 months within organisation.

PRC_011	John	M	University Researcher (Regional)	-	1:1
PRC_012	Andrea	F	Public Health Practitioner for Mental Health in Schools (Regional)	3 years 5 months	1:1
PRC_013	Chris	M	CAMHS Stakeholder; Children's Services Representative (Policy)	9 years; 7 years	1:1
PRC_014	Harry	M	Government Stakeholder for Mental Health and Wellbeing (Policy)	0 years 8 months	1:1
PRC_015	Frank	M	Teachers' Trade Union Policy Representative (Policy)	2 years 8 months	1:1
PRC_016	Dana	F	Senior Public Health Officer (Community/Local)	10 years	1:1

Table 11: Policy, regional and community stakeholder sample characteristics

4.5.2. Schools

4.5.2.1. *Sampling*

Intra-school variability was considered a pertinent way to ensure complexity and context could be explored, considering the instrumental case is singular and only provides the perspective of one supra-system. This variability could therefore be constructed using existing educational structures. Within these structures, variability was a key target to further explore different contexts within the case. To facilitate differential context, two central variables were used to map out the case prior to sampling: pupil free school meal (FSM)% entitlement, for socio-economic context, and population density, for socio-geographic context (Pfadenhauer et al., 2017). These variables were considered a way to explore other elements of context as surveyed previously.

Hobbs and Vignoles (2010, p. 673) term FSM entitlement as ‘widely used as a proxy for SES [socio-economic status] in UK educational research’. FSM is used as a means to create a stratified sample of local authorities (LAs) and their schools, and will be used in conjunction with the secondary variables (population density and school size), to explore rural and inner-city variances. This variable choice was primarily informed by practicality: readily-accessible school level data was only available for FSM⁵. All data for this sampling method was found on Welsh Government websites *Stats Wales* (Welsh Government, 2016a) and *My Local School* (Welsh Government, 2016b) and were taken from the most recent academic year before the fieldwork, where possible.

At the school level, exploratory variable stratified sampling was used to ensure the two schools selected were variable in their socio-economic and socio-geographic contexts (Pfadenhauer et al., 2017), using both FSM and population density. School size was also introduced as a third variable based on perceived potential differences between small and large complex adaptive systems. The school level sampling process included creating a stratified sample matrix for all primary schools across both LA3 and LA5. A list of schools was collated for each LA, based on data available from Welsh Government site *My Local School* (Welsh Government, 2016b). Data were then compiled for each of the above schools for FSM% and size.

The inclusion and exclusion criteria for schools was as follows:

- Inclusion: all state mainstream non fee-paying primary schools within LA3 and LA5
- Exclusion: schools without FSM% eligibility data; fee-paying schools; pupil referral units; Welsh-medium schools⁶

After data-sets were constructed for school level sampling, the school lists for LA3 and LA5 were stratified by FSM%. At this stage the data sets were cleaned to omit

⁵ SES may have been used if sampling was conducted by socio-geographic areas, rather than LAs. Due to the focus on schools within a supra-system led systems perspective, FSM-by-school was the most relevant available measure to use.

⁶ Due to the lead researcher being a non-Welsh speaker.

any outliers. These included schools which did not have either FSM or size values: these were mostly new schools without the relevant data, or newly amalgamated schools (either a combination of separate infant and junior schools or two schools from one geographically proximate area). New schools were therefore omitted from the stratified sample and were not forwarded for recruitment.

After the school lists for LA3 and LA5 were stratified by both FSM% high and school size high, interquartile ranges were calculated in order to subdivide the stratified sample into high quartiles (top 25%), low quartiles (bottom 25%) and interquartile ranges (mid 50%), based on FSM% high. As the school lists, particularly for LA5, were quite small, it was not possible to stratify lists based on combined variables, therefore within the interquartile ranges for FSM, one large and one small school were selected. This study was primarily interested in recruiting schools with a cross-section of FSM% and size, therefore the sampling for school size was based on a less stringent measure compared with FSM.

4.5.2.2. *Recruitment*

From the generated school lists, letters and e-mails, addressed to the head teacher, were sent out to a selection ($n=5$) of schools from each of the interquartile lists (total =20) which provided scope for variance in FSM, geographic context and school size, detailing the study and ascertaining potential interest. Four schools responded. Four initial meetings were organised with school contacts. The two schools from each LA who agreed first, and who reflected the three key exploratory variables (FSM, school size, geographic context), were forwarded for the study, as these reflected diversity across these variables (see Table 12). It was considered crucial that these exploratory variables were present within the school sample, as these were theorised to provide scope for ensuring that diverse contexts of 'sub-systems' (Keshavarz et al., 2010) within the wider educational supra-system, could be represented.

For the two schools detailed below, face-to-face meetings were arranged with the head teacher from interested schools, where the study aims were communicated

and any questions could be asked prior to agreement. Timeframes for project completion were discussed as well as any specific requirements that schools had. Enhanced Disclosure and Barring (DBS) certificates were provided by the researcher and schools' child protocols were communicated to the researcher.

4.5.2.3. *Sample characteristics: Rangers and Holloway schools*

The two primary schools selected for the data collection were Rangers and Holloway⁷. Table 12, below, outlines the key demographic information for each school mapped on to the three exploratory variables.

School name	Educational Consortia	Local Authority	FSM %	School size (no. of pupils)	Urban/Rural classification (based on population density)
Rangers	CSW	5	6	250	Rural
Holloway	CSW	3	46	430	Urban

Table 12: School sample characteristics, including variable information for FSM%, school size and urban/rural classification, based on population density

The two schools were stratified by all three variables: Rangers, a small 'Church in Wales' school, is situated in a rural location in a sparsely populated area outside LA5. Rangers has approximately 250 pupils with 5% of pupils entitled to free school meals, a 24.6% pupil-teacher ratio, and is categorised as 'green' in Welsh Government's support category system. Rangers is an English-medium school, has a mixed-gender intake and a c. £3500 budget per pupil. Pupils at Rangers are predominantly white-Welsh identifying.

Holloway school, situated in LA3, has approximately 400 pupils with 45% of pupils entitled to free school meals, a 18.6% pupil-teacher ratio, and is categorised as 'yellow' in the support category system. Whilst Holloway is also designated as

⁷ Allocated pseudonyms.

English-medium, the headteacher mentioned that 44 different languages are spoken at the school and that the school provided education for many refugee families in the city and a high proportion of pupils have alternative learning needs. It has a mixed-gender intake and c. £4000 budget per pupil.

Holloway and Rangers schools therefore are situated and operate in very different communities with varying contextual factors. Analysis of data throughout the chapter will refer to these contexts as to explore the extent to which these moderate the interpretation and recontextualisation of MHWB policy messages, and their subsequent effect on schools' intervention practices. Contexts, discussed previously in terms of 'school effects', including pupils' socio-cultural backgrounds and social class have been considered important moderators of inter-school variance (Henderson et al., 2005). Table 13 documents characteristics for Holloway and Rangers primary schools. Sampling and recruitment for both school staff and pupils was considered complete when both data and inductive thematic saturation (Saunders et al., 2018) was achieved.

4.5.3. School staff

4.5.3.1. *Sampling*

Staff considered relevant to the aims of the project (i.e. individuals with oversight, responsibility, participation in delivering MHWB interventions) were initially identified by researcher-school contacts (at Holloway this was the 'wellbeing coordinator', also a class teacher in Key Stage 2; at Rangers this was the head teacher).

4.5.3.2. *Recruitment*

Once relevant staff were identified by school contact teachers they were approached by the researcher. The ethics section details informed consent processes. The following table (Table 13) details the sample characteristics for school staff and pupils.

4.5.3.3. *Sample characteristics*

ID	Participant pseudonym	Gender	Job role	Length of time in role	Type of interview
RPS_001	Alexandra	F	Year 6 Class Teacher	15 years	1:1
RPS_002	Nicole	F	Year 5 Class Teacher	1 year 2 months	1:1
RPS_003	Rachel	F	Head teacher	3 years 1 month	1:1
RPS_004	Paula	F	Deputy Headteacher and Alternative Learning Needs Coordinator (ALNCO)	2 years 6 months	1:1
RPS_005	Matthew	M	Year 6 Class Teacher	1 year 2 months	1:1
RPS_006	Deb	F	Year 5 Learning Support Assistant (LSA)	15 years 6 months	1:1
RPS_007	Clara	F	Emotional Literacy Support Assistant	11 years 1 month	1:1
RPS_008	Becky	F	Emotional Literacy Support Assistant	13 years	1:1
HPS_001	Daniel	M	Emotional Literacy Support Assistant	14 years	1:1
HPS_002	Zara	F	Emotional Literacy Support Assistant	3 years	1:1
HPS_003	Victoria	F	Wellbeing co-ordinator; Key Stage 2 Class Teacher	7 years 3 months	1:1
HPS_004	Marie	F	Headteacher	3 years 7 months	1:1

Table 13: School staff sample characteristics

Key: RPS = Rangers primary school; HPS = Holloway primary school

4.5.4. Pupils

4.5.4.1. *Sampling*

The sample frame for pupils were provided by each contact teacher in the form of class lists for both Year 5 and 6 cohorts (Key Stage 2). The researcher and school contact teacher discussed the sampling frame for pupil level recruitment, and the researcher reiterated that it would be preferable to recruit pupils from a range of backgrounds and academic abilities within Key Stage 2 (year five and six). This was agreed upon and was embedded into the pupil recruitment strategy. The final sample frame was dependent on the type of informed consent process utilised (see ethics section for further detail), with one school preferring an opt-out approach, one school preferring for opt-in⁸.

4.5.4.2. *Recruitment*

Relevant pupils who were eligible for participation based on parental opt-in/opt-out were identified by school contact teachers. The researcher was introduced to pupils initially at a school assembly (Rangers) or on the day of the interview (Holloway). Pupils were provisionally selected for participation by school contacts, and were provided the chance to identify a friend they would like to participate with (self-selected friendship groupings). On the day of the interview, accompanied by a learning support assistant, the researcher read through age-appropriate information assent sheets with pupils. The ethics sub-section details consent processes (parents) and assent processes (pupils) in further detail. The following table details the sample characteristics for school staff and pupils.

4.5.4.3. *Sample characteristics*

Table 14, below, details sample characteristics for school pupils interviewed.

⁸ Section 4.7.1.4. details the potential limitations of using dual opt-in/opt-out consent.

ID	Participant pseudonym	Gender	Pupil demographic	Age	Type of data collection
HPS_005	Beth	F	Pupil, Y5/6 – High Stream	Age 9-11	Paired
HPS_006	Rosa	F	Pupil, Y5/6 – High Stream	Age 9-11	
HPS_007	Jon	M	Pupil, Y5/6 – ALN stream	Age 9-11	Paired
HPS_008	Michael	M	Pupil, Y5/6 – ALN Stream	Age 9-11	
HPS_009	Katie	F	Pupil, Y5/6 – ALN stream	Age 9-11	Paired
HPS_010	Jess	F	Pupil, Y5/6 – ALN Stream	Age 9-11	
HPS_011	Adam	M	Pupil, Y5/6 – High Stream	Age 9-11	Paired
HPS_012	Robert	M	Pupil, Y5/6 – High Stream	Age 9-11	
HPS_013	Ffion	F	Pupil, Y5/6 – High Stream	Age 9-11	Paired
HPS_014	Annabel	F	Pupil, Y5/6 – High Stream	Age 9-11	
HPS_015	Chris	M	Pupil, Y5/6 – ALN stream	Age 9-11	Paired
HPS_016	Samuel	M	Pupil, Y5/6 – ALN Stream	Age 9-11	
RPS_009	Luke	M	Pupil, Y5	Age 9-10	Paired
RPS_010	Steph	F	Pupil, Y5	Age 9-10	
RPS_011	Amy	F	Pupil, Y6	Age 10-11	Paired
RPS_012	Lora	F	Pupil, Y6	Age 10-11	
RPS_013	Alex	M	Pupil, Y5	Age 9-10	Paired
RPS_014	Kieran	M	Pupil, Y5	Age 9-10	
RPS_015	Sara	F	Pupil, Y5	Age 9-10	Paired

RPS_016	Charlie	F	Pupil, Y5	Age 9-10	
RPS_017	Ryan	M	Pupil, Y6	Age 10-11	Paired
RPS_018	David	M	Pupil, Y6	Age 10-11	
RPS_019	Richard	M	Pupil, Y6	Age 10-11	Paired
RPS_020	Dot	F	Pupil, Y6	Age 10-11	
RPS_021	Jack	M	Pupil, Y6	Age 10-11	Paired
RPS_022	Lisa	F	Pupil, Y6	Age 10-11	
RPS_023	Luke	M	Pupil, Y5	Age 9-10	Paired
RPS_024	Will	M	Pupil, Y5	Age 9-10	

Table 14: School pupil sample characteristics

4.6. Method

This section will overview and justify the use of qualitative interviews, before providing detail as to their use with both policy, regional, community and school stakeholders, and primary school pupils. It will appraise the data generated from each type of interview before critically considering the variations on the interview. An overview of the data collection process will conclude the section. Returning to considerations in the previous chapter, methodological approaches to understanding the context of interventions and the systems in which they are implemented and interact with, is imperative. To this end, Howarth et al. (2016, p. 107) suggest that qualitative methods are particularly useful and relevant for understanding the ‘theoretical basis of interventions, exploring how, where, when and by whom an is intervention delivered and received, identifying effects and how they are achieved, and characterising how interventions are adapted in response to contextual influences and how contexts themselves are modified by interventions’.

4.6.1. Qualitative, semi-structured interviews

This study utilised in-depth qualitative semi-structured interviews with policy, regional and community level stakeholders, as well as school staff, as these were ideally suited to the thesis aims and research questions as noted above by Howarth et al. (2016). Interviews were conducted in one-to-one, paired and group formats, based on the availability and preference of recruited individuals. Interactive interviews with primary school pupils in years five and six across the two recruited schools were conducted, underpinned by the mosaic approach (Clark and Moss, 2001).

Qualitative research is widely considered to be an effective way to explore under-researched, complex and sensitive topics (Silverman, 2015). Within qualitative research, the semi-structured interview is considered a bridge between standardised, closed-ended approaches and free-form, open-ended research (Adams, 2015). Galletta and Cross (2013, p. 72) note how semi-structured interviews enable researchers to 'attend to lived experience and pursue questions from extant theory'. Semi-structured interviews were used over structured approaches because they allow for flexibility and are applicable with epistemologies such as critical realism as well as projects focused on qualitative explorations of stakeholders' perceptions of system-level effects on MHWB interventions.

Kallio et al. (2016) write that 'the semi-structured interview method has been found to be successful in enabling reciprocity between the interviewer and participant (Galletta and Cross 2013), enabling the interviewer to improvise follow-up questions based on participants' responses (Polit and Beck 2009; Rubin and Rubin 2005) and allowing space for participants' individual verbal expressions' (Kallio et al. 2016, p. 2955). This approach also allows the participant to direct the focus of the interview and is consistent with an analytical approach that favours both theoretical and data-driven information (see analysis section).

4.6.2. Interviews with policy, regional, community and school participants

Semi-structured interviews were conducted with key, identified stakeholders at policy, regional and community levels, as well as with members of the senior

leadership teams (i.e. head teachers, deputy head teachers), teaching and support staff at Rangers and Holloway schools. A range of one-to-one, paired and group semi-structured interviews were used. Interviews were conducted with each purposively/respondent-driven sampled stakeholder/school staff member, and were based on semi-structured topic guides. Appendix G contains full interview topic guides. Indicative areas for interview included:

1. Role/biography/responsibilities – how long staff had been in post, main responsibilities, outline of their role (general/relative to MHWB provision)
2. School role/definitions of and perspectives on supporting child mental health/ resources and support – how participants described the role of the school in supporting MHWB interventions; how they felt about supporting MHWB provision; appraising barriers and facilitators to effective MHWB provision; whether they felt comfortable, confident, equipped with resources, skills and knowledge to effectively promote MHWB; whether they felt supported in this role by the school management; their own mental health and wellbeing
3. Current MHWB approaches: what interventions were implemented (universal; whole-school; selective); school policy, curricula relative to MHWB; intervention training; multi-agency collaboration with external partners; perspectives on effectiveness of current initiatives
4. Systems: how MHWB interventions are selected, introduced and implemented within the school/national, EC, LA sub-system(s); responsibility and remit for implementation; evaluation of MHWB at school level; perception of other staff and pupil responses to interventions; whether approaches are sustained within the system; evidence-base of implemented MHWB
5. Intra- and inter-school relationships and communication: quality of communication and relationships between staff and pupils; between staff
6. Pupil and family engagement in interventions: to what extent pupils are actively involved in decision making around health and MHWB; mechanisms for pupil involvement; family and community engagement

7. Welsh curriculum: how the new curriculum might affect primary school-based MHWB interventions

4.6.3. Paired interviews with pupils

Interactive interviews with pupils were paired based on self-selected friendship groupings (Highet, 2003). Highet (2003) suggests that using paired friendship methods can afford researchers an insight to interactions between participants and on their social relationships. Furthermore, in the context of interviews with children, the paired friendship method has been considered to help create a 'supportive social context [enabling] participants to engage fully in conversation' (Highet, 2003, p. 109), and is particularly useful when an informal setting is preferred. This approach therefore is viewed relevant when researchers are looking to mitigate 'schooled docility' (Gallacher and Gallagher, 2008), develop trust and rapport, and where the focus of the research is on the non-academic environment of emotional spaces and MHWB intervention practices (Highet, 2003).

This project approached research with children from the theoretical perspective of the new sociology of childhood, in which 'children are recognised and valued as competent social actors with knowledges about their social worlds' (Lomax, 2012, p. 10; James et al., 1998; Sutton, 2009). This study takes account that 'children can be skilled communicators in a host of different ways. If researchers use methods that are oriented around these skills, then children can engage more productively with research' (White et al., 2010, p. 144). This study therefore fused an unstructured interview with a participatory approach, based on Clark and Moss' (2001) 'mosaic' approach to create an interactive interview, providing various forms in which pupils could contribute to the research through talking, drawing, colouring, and mapping ideas on paper.

The primary data used from these interviews was the audio-recorded, transcribed conversations arising from these interactive interviews, however the participatory elements of these interviews are critically explored and justified in this section. In the context of this thesis, captioning was considered central to the establishment of a consistent data set, from PRC stakeholders, school staff and pupils, of transcribed,

spoken data which could be analysed using thematic analysis. Within the analysis, child participants' perspectives were given equal weighting to those of adult stakeholders during the semi-structured interviews.

Interactive interviews consisted of two main questions, which formed the basis of two activities. As with the staff and stakeholder interviews, the researcher spent ten minutes at the start of each interview building rapport with participants, asking pupils about their day, what they liked to do outside school, etc. Appendix G details the interview guide. The first question was '*what makes you feel healthy and happy?*', and was not limited to their in-school lives, but including everything they experienced. Though not directly linked to MHWB provision initially, it was felt after piloting, that it was important to continue the 'icebreaker' section and allow participants the space to talk about their everyday lives before focusing on the school environment. The mosaic element of this question featured the 'brain map' (Appendix I) which was a researcher-developed tool where stickers with commonly theorised biological, psychological and social determinants of child mental health and wellbeing were provided. Pupils were asked if they would like to use some of these stickers (and/or develop their own if they preferred) to stick on to the map. This was broadly used as an elicitation exercise to inspire discussion.

The second question was again framed around '*what makes you feel healthy and happy?*', but was situated specifically in the school environment. This question featured a different mosaic-influenced element, again a range of elicitation stickers, but this time listing a range of MHWB interventions that had been discussed in interviews with policy, regional and community stakeholders and school staff, which had been undertaken previously. Pupils were asked whether they were able to rank and rate different interventions using a 'circle map' (Appendix I), again developed by the researcher. The idea behind this was to ask pupils to draw or write something about themselves in the centre circle of the page. There were a number of rings getting larger as they reached the edges of the pages, and pupils were encouraged to think about how important the interventions they had chosen from the lists were to them, and discuss why at the same time.

As well as the main questions, there were a number of additional questions asked as the interviews progressed, for example *'What are your experiences in school?; What do you enjoy doing in school? What does the school do to help you feel happy and healthy, and does this help?; Is there anything else you would like the school to do to make you feel healthier and happier?; Are you involved in what happens in school?; Is there anything not on the stickers that you think is important?'*. These were mapped on to the previous sections of adult stakeholder interviews to ensure a degree of comparability between the different stakeholders' perspectives on system-wide MHWB provision and were developed to ensure a consistency across the data set. Questions were focused solely on the positive framing of MHWB interventions as this was considered to mitigate any minimal risk of harm occurring from the interviews, a key consideration arising from the process of applying for ethical approval.

Considerations around voice and participation were foregrounded where the interactive interviews were developed and employed in the data collection. Firstly, the two visual elements (brain and circle map) were developed and modified after consultation with pilot participants, as were some of the questions to ensure these were age-appropriate and likely to be effectively communicated and understood. Feedback on participant information sheets and consent forms was also gathered prior to any data collection commencing. These forms were also provided to participating schools and discussions were had on the appropriateness of language, layout, visuals etc., and any modifications requested were done so. Furthermore, a member of support staff, usually a learning support assistant (LSA), was present during the mosaic interviews to help with communicating the study to pupils, and ensuring that they were genuinely happy to participate, and only after this did the interviews commence. LSAs remained present throughout the interviews at both schools.

4.6.4. Appraising interview data

4.6.4.1. Interviews with policy, regional, community and school participants

Alshenqeeti (2014) critically engages with the potential pitfalls of using interviews as a sole data production method, suggesting that observations may be useful as a supplementary method when investigating how beliefs and behaviour intersect. Alshenqeeti (2014) notes that, although dependent on the nature of the research questions, multiple means of collecting data facilitates richer and more valid data.

Over-reliance on interviews has also been criticised by those in the 'radical critique' (Hammersley, 2017), namely by the constructionist and ethno-methodological research communities who see participant observation as critical to interactionist research. For example, Atkinson (2015, p. 60) writes that the interview is limited to a 'social encounter', inherently performative, and a way of constructing identity and biography. However, considering the key focus of the study, particularly with regard to the three research questions, the semi-structured interview was considered the most relevant of qualitative methods.

Maxwell (2012) refers to reflexive work within critical realism as 'retain[ing] an ontological realism while accepting a form of epistemological constructivism and relativism' (Manzano 2016, p. 343), and while this combinatory approach is arguably compatible with critical realist qualitative work, it is important to note that qualitative research rarely applies an unequivocal realism (Manzano 2016), and therefore cannot escape some form of constructionism. At the epistemological level, this project agrees that, 'what people say in an interview will indeed be shaped, to some degree, by the questions they are asked; the conventions about what can be spoken about [...] by what they think the interviewer wants; by what they believe he/she would approve or disapprove of' (Hammersley and Gomm 2008, p. 100). Alshenqeeti (2014) adds to this line of thought, noting that interviewee perceptions are subjective and are liable to change both circumstantially and temporally.

Having considered the limitations documented above, the credibility of qualitative work focused on interviews can be developed, and the following is perceived as a way to mitigate these limitations. Lincoln and Guba's (1985) work provided alternative ways in which to judge the rigour of, and justify qualitative methods including interviews. Their criteria have been conceptualised in a number of different ways: various papers have used the above terms - credibility, confirmability,

dependability and transferability (Kallio et al., 2016; Shenton, 2004), however other authors approach this slightly differently. Noble and Smith's (2015) approach to alternative criteria based on 'truth value, consistency, neutrality and applicability' referring to the overall 'credibility' of qualitative research (Lincoln and Guba, 1985) has been used as a holistic framework for judging the quality of the method and is widely-used and well-established in qualitative methods. The four criteria for assessing the overall credibility of the work have been applied to the study's method approach to ensure credibility was maximised.

'Truth value' refers to researcher reflexivity and reflection on their personal perspectives and potential bias on the data. 'Consistency' and 'neutrality' can be achieved by 'transparent and clear description of the research process from initial outline, through the development of the methods and reporting of findings' (Noble and Smith, 2009, p. 35), these concepts underpinning the extensive documentation, justification and critique of the research design. Additionally, the authors recommend the use of a research diary, as well as open discussions with other members of the research team regarding key topics, and the data analysis process. Notes were kept which formed the basis of the reflexivity section (see below), and open discussions between the student researcher and supervisors took place throughout the data collection, analysis and write-up stages.

Truth value, consistency and neutrality was ensured by the researcher keeping a reflexive log, electronically in *NVivo*, which covered several aspects during the thematic analysis of data, including the reasons for privileging certain categories, themes and central organising concepts over others (Braun and Clarke, 2019, 2006). This log was used to develop the abductive thematic framework which was discussed in depth with the supervisory team during the analysis phase, where meetings would focus on assumptions made of the data and how the data would be organised into certain themes. Noble and Smith (2015, p. 35) refer to this process as 'peer debriefing'. Truth value also included ensuring data generated represented the phenomena studied and was relevant to study research questions.

Finally, 'applicability' can be compared with 'generalisability', as applied to quantitative research. Ways in which this can be improved include an in-depth

detailing of context (Noble and Smith, 2015, p. 35), which was captured within the research diary. Key features of the research diary included notes on data collection visits, which captured detail on contextual factors relevant to the settings where data collection took place, for example the school environment, relationships with gatekeepers, participants, etc.

All interviews were audio recorded, transcribed verbatim, and core issues at each stage of the data collection were discussed and critically analysed with supervisors. As part of the instrumental case-study methodology, rich contextual detail was provided, and the reflexive log detailed how findings may be applicable to other contexts⁹. This study generates theoretical propositions which can be potentially tested at a future date using quantitative and qualitative methods. During the interview process, leading questions were avoided, and a reflexive log was maintained, so that the tape recorder was not the sole recording device, and participants were given the opportunity to clarify or reflect on any of their statements at the end of each interview (Alshenqeeti, 2014).

Considering the debate above, semi-structured interviews were used over structured approaches as they allow for flexibility, allowing the researcher to establish core concepts considered as central to the study research questions, as well as ensuring the participant can also direct the focus of the interview. This flexible approach is therefore consistent with an abductive, thematic approach to analysis, where both theoretical (from the literature review) and empirical codes (from the data) are used to order and analyse data. Interviews were based on semi-structured topic guides (see Appendix G).

4.6.4.2. Pupil interviews

Emmel and Clark (2011, p. 1) view creative, participatory qualitative approaches as being an effective way at both representing and understanding the social world, and can 'facilitate our sociological theorisation of place'. Approaches such as the mosaic (Clark and Moss, 2001) therefore provide a way to theorise places such as schools

⁹ See discussion.

and policymaking organisations from a complexity science perspective, suggesting compatibility between this method and the conceptual and theoretical approach documented in Chapter 3.

However, Spyrou (2011, p. 151) writes that the methodological shift to children's rights in qualitative research, though much-needed from an ethical and methodological perspective, has often been unable to 'attend critically to issues of representation'. Similarly, Gallacher and Gallagher (2008) consider the dangers of assuming automatic superiority of participatory methods: that is to say that creative methods such as the mosaic do not inherently provide a more 'authentic' voice or is a 'better' means of representation, a view shared by James (2007).

With representation comes issues of power, and Spyrou (2011) considers that issues of power permeate all research, including those such as the interactive interview conducted for this project. Power is never alleviated, even by participatory methods, and is only transferred or mitigated, subject to 'intrusive others' (Mannay, 2013, p. 141). Various researchers have attempted to mitigate adult-child power differentials by taking the 'least-adult' role (Mandell, 1988), by which both social and physical positionality (for example authority) of the researcher is reduced as much as possible, or, where the researcher seeks to embrace friendship with child participants (Corzaro, 2003; Fine and Sandstrom, 1988). These 'strategies' are not without fault however: for instance, researchers should consider the potential impact of befriending child participants on their relationships with teachers, other adults and schools (Thorne, 1993). Equally, this may not be received well by children and young people participating in research, and researchers adopting this stance may risk being viewed as contrived or an 'imposter' (Raby, 2007, p. 51).

It is likely however that any mosaic influenced interview undertaken in schools will be 'inevitably driven by adult research agendas, time-frames and priorities' (Lomax, 2012, p. 108), unavoidably based around an assignment or agenda (Chalfen, 2011). This study cannot therefore claim to regard participants as 'primary researchers' (Spyrou, 2011, p. 155) who have agency over all aspects of the research, but does however seek to find a pragmatic middle-ground by intending to form strong and trusting partnerships with participants and schools, and provide collaborative

participants with plenty of room for expression and agency in which to shape the research during the data collection stage. Consequently, a 'democratisation' of the research process (Mand, 2012) hopefully occurred to some extent.

Based on the above debate, this study adopts a pragmatic perspective on participatory research, and acknowledges inherent power differentials between the adult researcher and child participants (Mayall, 2000). The study does not claim to be a 'fully' participatory one, however operationalises methods which are less likely to be seen by child participants as an 'interrogation' or 'investigation' (Spyrou, 2011, p. 153), and provide a space in which participants can contribute their opinions, and as a useful methodological way to answer research question 3: pupil experiences of schools' MHWB intervention practices. Furthermore, Fecho (2011) comments that writing in school is typically conceptualised as belonging to teachers, rather than as providing meaning-producing capacities for learners, therefore it was considered feasible that a research approach underpinned mainly by the written form would create an environment of 'schooling docility', where pupils would perform the role of pupil rather than research participant (Gallacher and Gallagher, 2008, p. 503).

The potential limitations of support staff being present within interviews (a condition of conducting research with child participants stipulated by both schools) were the potential for the presence of these actors to create an environment of 'schooling docility' (Gallacher and Gallagher, 2008), where pupils may potentially have behaved as if in a traditional educational space such as the classroom. Pupil interviews were however designed with this key consideration in mind, and were situated within schools' 'emotional spaces', usually 'Cwtch' or Nurture rooms. As a result, the majority of interviews conducted were viewed to have led to cultivation of informalised, non-academic environments where pupil participants could contribute to and engage with the research as they wished, without feeling answers or behaviour were conditioned by being within the 'traditional' school environment such as the classroom.

On the one hand there were instances where LSA staff present in interviews 'reverted' back to their roles as school staff, potentially affecting pupil participant responses, however, overall these occurrences were very limited across the total

interviews. On the other hand, reflecting on the data collection phase during the analysis, the potential utility and advantageous affordances of the presence of LSAs within research spaces were considered. Though initially considered a potential limitation for the reason identified above, having LSAs (who were also key intervention agents), present in research spaces that were also used as emotional spaces provided a unique perspective to explore interactions between staff and pupils within the interview.

4.6.5. Variations on the interview

For interviews with policy, regional and community stakeholders, and school staff, initially the project sought to solely use one-to-one interviews, however for reasons of practicality, this approach was not always possible. Often it was only possible to conduct interviews with multiple participants. For example there were occasions where the researcher initially thought they were meeting one stakeholder and subsequently, interested colleagues expressed their enthusiasm to participate. Also, occasions where members of the same organisation who were originally to be interviewed separately expressed preference to be interviewed together as a time/resource-saving measure. All interactive interviews with pupils were conducted using self-selected friendship groups.

It is noted that mixing qualitative methods is not an unproblematic enterprise (Barbour, 1998), particularly regarding the different data produced by different forms of qualitative interview. Barbour (1988) contends that using multiple qualitative methods is not necessarily 'quality assurance', and that an uncritical engagement with the different affordances of different methods is problematic. In this paper, focus groups and interviews are considered as producing different types of data and where different components of the data production process (e.g. the impact and interpretation of silences). In this study, the majority of interviews with policy, regional and community stakeholders were conducted as one-to-one interviews with a couple of exceptions.

Therefore methods within each participant group had intra-method consistency, though there existed some differences across the groups. The limitations of mixing

qualitative methods across the data (Barbour, 1998) set are considered within the wider limitations of the study, and are justified primarily on a convenience and practicality basis. As noted above, ultimately the chosen qualitative methods provided positive affordances that complemented the study aims, objectives, research question and case study methodology.

4.6.6. Overview of data collection

Table 15 details the number of interviews, number of participants, mean length of interview and total length of interviews.

Level of supra-system	Number of interviews	Number of participants	Mean length of interview	Total length of interviews
Policy, regional and community	13	16	54 minutes	701 minutes 11.6 hours
School staff	12	12	44 minutes	529 minutes 8.8 hours
School pupil	14	28	39 minutes	546 minutes 9.1 hours
Total	39	56	46 minutes	1776 minutes 29.6 hours

Table 15: Interviews conducted across each level of supra-system case study, detailing number of interviews, participants, mean and total length of interview

4.7. Ethics

This project was granted ethical approval by the Cardiff University School of Social Sciences Research Ethics Committee, reference number: 2262 (Appendix F). This section will consider key ethical considerations including informed consent, confidentiality and anonymity, data processing and storage processes, as well as the potential risk of harm to participants.

4.7.1. Informed consent

Informed consent processes will be documented at each stakeholder level, from policy, regional and community stakeholders, school staff, parents and pupils.

4.7.1.1. *Policy, regional and community participants*

After recruiting policy, regional and community stakeholders, written informed consent was required before all interviews took place. Participant information sheets (Appendices A-B) were sent out to policy, regional and community level participants, fully detailing the aims, objectives, requirements, ethical processes and details of the researcher. Participants were able to either return consent forms (Appendices A-B) via post or in person at the time of interview. Potential participants were given a minimum of 21 days to consider their participation, and were required to opt-in to the study.

Prior to interviews, policy, regional and community level participants were given the opportunity to voice any concerns or questions, and reference was made to information sheets to ensure a transparent research process. A final check was made by the researcher to ensure stakeholders were informed of the aims and processes of the study and were happy to participate. Where stakeholders were happy to proceed, the interviews proceeded and were audio recorded verbatim.

4.7.1.2. *School staff*

Informed consent processes for school staff were the same as for policy, regional and community stakeholders.

4.7.1.3. *Parents*

Parental consent processes were discussed in detail (Appendices C-D) with schools. The researcher noted that the study had been granted parental opt-out consent by the university School of Social Sciences Research Ethics Committee, however this also covered opt-in processes. Rangers school communicated their preference for

opt-in consent; however, Holloway preferred an opt-out process. The section on sampling above detailed the different affordances of these processes and the potential limitations of selection bias and representability, particularly where opt-in was applied. At both schools it was agreed that all data collection sessions would take place on the school site in one of the breakout rooms also used for MHWB interventions, reading and other one-to-one sessions. Both schools requested that a member of support staff were present for the full duration of the paired pupil interviews.

Age-appropriate information assent sheets (Appendix E), which were developed in collaboration and on the basis of a piloting process feedback with two 9-11 year olds, were distributed to purposively sampled pupils, with separate parental and pupil information sheets sent out to by the school to parents. Additionally, a further two methods of communicating with parents were utilised (text services, bulletin e-mails) to ensure that the researcher could be on balance confident that information about the study was received. This was agreed with schools based on their perceptions of the most effective method of communication.

Parental opt-out/opt-in consent forms (Appendices C-D) were sent via Royal Mail post by schools and included a freepost return envelope which they could use to post back to the school. Parents/guardians were given 21 days from receipt of letter to opt their child out of the project. Opt-in forms could be returned up until the day before data collection was scheduled to commence. Sheets clearly documented how parents/guardians could opt-out/opt-in (Appendices C-D). This study preferred to use parental opt-out consent, rather than opt-in, for the following reasons: (1) pupil topic guides did not include any sensitive questions about mental health and wellbeing; (2) Junghans and Jones (2007) write that significantly lower response rates result from opt-in processes when compared with opt-out, and create an inherently biased sample in favour of affluent families.

The authors believed that opt-out should be the 'default strategy for studies that pose a low risk to patients [or participants] (Junghans and Jones, 2007, p. 4); (3) it is important for work conducted at the population level, such as development of school-based interventions, that pupils in each school are adequately and fairly represented;

(4) by using multiple methods of communication, it is highly unlikely that parents/guardians will not have ample opportunity to opt their child out of the study. As stated above however, one school preferred to implement an opt-in process. Based on the above, it is therefore likely that the sample from this school were subject to a form of selection bias which may have ultimately affected the representativeness of pupils within the Key Stage 2 cohort.

The above procedures conformed with Article 12 of the United Nations Convention on the Child (UNICEF, 1992) particularly that 'every child has the right to express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously'. This also reflected the foregrounding of children's rights and New Sociology of Childhood approaches.

4.7.1.4. *Pupils*

Pupils were read age-appropriate information assent sheets in full with the member of support staff present during the entire data collection sessions. Only when the staff member was sufficiently convinced that the pupil(s) had provided their assent to participate in the interview, based on their professional judgement, did the interviews take place.

4.7.2. Confidentiality and anonymity

In addition to outlined procedures for confidentiality and anonymity (such as job title randomisation), pupils were asked to choose their own pseudonyms (framed as a nickname or favourite name). Policy, regional, community and school level participants were allocated pseudonyms to ensure anonymity, and extra precautions were taken where stakeholders could be easily identifiable from their job role. In these instances, job titles were randomised. Schools were also allocated pseudonyms. This was particularly the case where stakeholders were recruited via chain-referral sampling, the 'outer' setting of the supra-system. All participants were ascribed a unique participant number as well as their pseudonym. All participant information sheets and consent forms documented that personal-identifiable data in audio transcripts would be anonymised and that data were confidential (see below

section on data processing and storage). Additionally, participants were notified that their physical consent forms would be kept separately from any digital audio and written data (interview audio and subsequent transcripts) to further protect their anonymity.

4.7.3. Data processing and storage

All participant information sheets contained details of the researcher and School of Social Sciences Research Ethics Committee, and stated that interview and participant data would be deleted upon request. Forms stipulated that physical data (i.e. completed consent forms) were to be kept in a locked filing cabinet in the research centre office, and digital data were to be stored on an encrypted drive on the researcher's password-protected university computer, and would not be available to anyone else. The same data storage processes held for any researcher-initiated documents referring to both anonymised and non-anonymised names.

Participant information sheets and consent forms were devised, and all data collection was complete prior to 25th May 2018, therefore the research conformed with previous data protection legislation, the Data Protection Act 1998 (UK Government, 1998). Once collected, data were processed and stored (excluding the storage length of time) in accordance with the Data Protection Act 2018 (UK Government, 2018), considered as the UK implementation of the General Data Protection Regulation 2016/679 (EU) (European Union, 2018), implemented on 25th May 2018. Any material generated during the pupil interviews was stored in a locked filing cupboard in the research office and were subject to the same data storage and processing requirements as audio data and transcripts of interviews. Copies were made, with originals returned to pupils via the school if pupils wished to retain their creations.

4.7.4. Minimising risk of harm

Regarding the research itself, this study did not envisage any risk of harm to adult participants nor pupils. Although the project explored MHWB interventions and

therefore pupil happiness and experiences of mental health, a positive approach was taken, with interview focus on school structure from a systems perspective, pupil experiences of school and their engagement in decision-making and intervention development, therefore risk of psychological harm was anticipated to be very low, and no instances of harm occurred during the course of the interviews, with all scheduled interviews completed and not terminated early. No referrals based on schools' child protection protocols were made during the course of the entire data collection process.

4.8. Analysis

Thematic analysis (Braun and Clarke, 2019, 2006) was used to analyse the empirical data. Thematic analysis is considered a flexible but systematic process to analysis of qualitative data, compatible with various ontological and epistemological perspectives (Braun and Clarke, 2019). Thorne (2000) writes that good qualitative projects draw from both inductive (for example data used to generate hypotheses and ideas) and deductive (data used for hypotheses testing) reasoning.

An 'abductive' approach to thematic analysis, where both theoretically and empirically driven themes are generated from interpretation of the data, was chosen as an appropriate method of thematic analysis due to the researcher looking to attain a balance between theoretically-driven (deductive) and data-driven (inductive) themes. The conceptual framework, which both influenced the data collection tools, such as interview schedules, and analytical tools such as the coding tree (see Appendix H) were based around limitations of the extant literature outlined in Chapter 2, as well as on developments in complex adaptive systems and contextual thinking presented in Chapter 3, and the empirical data analysed in Chapters 5-7. These considerations therefore influenced the development of theoretically-driven themes. However, the approach to analysis was developed to ensure space and potential was also given to the construction of novel, data-driven themes.

Though thematic analysis is often approached in a linear, stepwise way, where many researchers tend to follow the approach outlined by Braun and Clarke (2006), the approach taken in this thesis followed a more iterative one. For instance, during the

process of conducting the analysis, it became clear that the steps taken were not linear, and previous steps had to be returned to at times. One example of this iterative approach was the development of the theme of 'liminal emotional spaces' which formed the basis for Chapter 7, focused on pupils' experiences of schools' implementation of MHWB interventions. The development of this theme arose after the initial round of themes were developed from the central organising concepts. However, on return to the school staff-level data featured in Chapter 6, as well as re-consideration of the literature review, this led to a re-search for themes (Step 3). Where it was clear there was conceptual and theoretical congruence between the staff-level data in Chapter 6, and the pupil data in Chapter 7, the concept of liminality was reviewed and subsequently added to the coding tree. The development of the coding tree was therefore iterative, and several versions were elaborated over the course of the analysis.

During the process of the review and selection of themes, developed from the initial central organising concepts, key analytical decisions had to be made, considering the relevance of deductive, theoretical-driven codes to the study's originality, place within the wider literature and relevance to the narrative. Although interesting in and of itself, the data generated from discussions on stakeholders' perceptions of the key social determinants of health were data that had to be selectively omitted from the final analysis and production of the narrative forming Chapters 5-7. It was unclear from this data how it contributed to exploration of the development, transmission, enactment and experience of school-based MHWB policy messages. Braun and Clarke's (2019) reflexive thematic analysis foregrounds the role of the researcher within the process of generating, searching for, defining and naming themes, and the above example illustrates the role the researcher played in making key analytical decisions based on the 'overall story' (Braun and Clarke, 2006, p. 87) of the data, and the relevance to answering the thesis' research questions.

Accounting for the above notions of iterative analysis, the six-step process of thematic analysis (Braun and Clarke, 2006) was therefore largely followed, providing a systematic process for initial coding and the development of a coding framework. The analysis took inspiration from the systematic structure of the six-step approach, and this approach provided the researcher with a framework to progress the analysis

from a more descriptive depiction of the data (often the result of the first three steps of Braun and Clarke's (2006) work and the development of 'central organising concepts'), to those that provided the foundation for the development of the narrative, and the 'overall story' of the data (Braun and Clarke, 2006, p. 87).

Table 16 details the six-stage process of thematic analysis (Braun and Clarke, 2006, p. 87), with examples of how these were followed in practice.

Stage	Description	Process
1	<p>Familiarising yourself with the data: Transcribing data, reading and re-reading the data, noting down initial ideas</p>	<p>Each transcript ($n=39$) was transcribed, checked against the audio, and subsequently read three times. During this process initial ideas were noted in the margins of each copy, which formed the basis for the empirically driven codes. Theoretically driven codes were applied to the data where relevant.</p>
2	<p>Generating initial codes: Coding interesting features of the data in a systematic fashion across the entire data set, collating data relevant to each code</p>	<p>Each transcript was coded three times: the first time using the theoretically-driven codes generated from the literature review, the second and third times based on the coding framework itself which led to the development both theoretical and empirical codes. The recoding process was more flexible and involved scaling down the number of categories and codes within <i>NVivo for Windows</i> (QSR International 2012), as originally this number was particularly high and difficult to apply to the subsequent stages.</p>
3	<p>Searching for themes: Collating codes into potential themes, gathering</p>	<p>At the second stage of coding, parent and child codes resembled 'topic summaries' (Braun and Clarke, 2019, p. 592) which are</p>

	all data relevant to each potential theme	considered ‘summaries of the range of meaning in the data related to a particular topic or ‘domain’ of discussion’. At this stage, therefore the analysis was still descriptive and based around several ‘central organising concepts’ such as ‘pupil experiences of MHWB interventions’, ‘policymakers’ perspectives on child mental health and wellbeing’, ‘attitudes to supporting pupil mental health and wellbeing’. Central organising codes that were mapped on to categories and codes in <i>NVivo</i> were altered and streamlined.
4	Reviewing themes: Checking if the themes work in relation to the coded extracts and the entire data set, generating a thematic ‘map’ of the analysis	The third round of coding led to the development of a coding framework, with clear themes generated from the stages two and three of the abductive analysis, as listed above. These were reviewed in discussions with supervisors. At this stage, data-driven themes were analysed again based on theory considered relevant based on the literature review.
5	Defining and naming themes: Ongoing analysis to refine the specifics of each theme, and the overall story the analysis tells, generating clear definitions and names for each theme. (See Appendix H for the coding tree)	Following review meetings with supervisors, key themes central to the analysis were defined and named – these became the basis for the sections and sub-sections within Chapters 5-7. Key inductive themes (theoretical and literature-driven) included ‘conceptual confusion’, ‘liminal emotional spaces’, ‘subjectivities’, ‘schools’ recontextualisation practices’. Examples of key deductive (data-driven) themes included: ‘reimagining emotional spaces’,

		'pupil ownership of space' and 'signposting and recommending providers'. These themes formed the basis of the coding tree (Appendix H).
6	Producing the report: The final opportunity for analysis. Selection of vivid, compelling extract examples, final analysis of selected extracts, relating back the analysis to the research question and literature, producing a scholarly report of the analysis	Data chapters were constructed around the key themes developed in stage 5 (see Appendix H). Within each section and subsection, quotes were chosen carefully, ensuring that these captured the key messages. Within each section and subsection, extracts were analysed and interpretations of the data were related back to both research question, the extant literature and theoretical perspectives documented in Chapters 2-3. The three chapters served as the final report for this study.

Table 16: Thesis application of Braun and Clarke's (2006) six-step approach to thematic analysis, with examples of each stage

4.9. Reflexivity

Reflexivity is a mainstay of well-conducted qualitative research (Fontana, 2004) and is predicated on an ongoing self-appraisal and self-critique (Dowling, 2006).

Reflexivity refers to the degree to which the researcher exerts intentional or unintentional influence on the research process (Jootun et al., 2009). Parahoo (2006) considered specifically the preconceptions and values, as well as behaviour, of the researcher as important elements to reflect upon in considering the research findings. Lichterman (2017) referred to many of consideration of these influences as 'positional' reflexivity.

To consider the researcher's impact on data collection and analysis, notes were taken specifically on the data production process – particularly interviewer-interviewee positionality, as well as a critical appraisal of the researcher's effect and

potential bias on interviews, analytical frameworks, data interpretation, coding, and analysis. This section will critically consider a few salient examples of how the researcher's positionality (i.e. background, values, attitudes) potentially impacted on the data collection, analysis and other stages of the research, reflecting on key advantages and disadvantages of this positionality, taken from the research diary:

My position as a former Learning Support Assistant (LSA) was likely to influence the data collection process. Although my previous role was not akin to the work conducted by many of the LSA staff interviewed during this project, particularly the Emotional Literacy Support Assistant (ELSA), my previous involvement in delivering both one-to-one and group based literacy interventions in primary schools would have to a degree afforded myself 'insider' status within the school settings where I conducted interviews.

Considering myself as a possible insider might have impacted on how I interacted with interviewees, and how they responded to my questions. My insider status may have influenced rapport building (Burns et al., 2012) as shared knowledge and practice might have helped establish an environment of trust and understanding. Burns et al. (2012, p. 53) note how being an insider is less likely to interrupt the 'flow of interactions', and is a status which potentially leads to insider researchers being more readily accepted into the research setting. Furthermore, it could provide a space where the researcher understands the culture (Burns et al., 2012).

With this in mind, my previous work in this area could have feasibly impacted on the generation of interview guides and the subsequent focus of interviews, particularly with support staff interviewed at both Rangers and Holloway. One of my interests from my previous work, through my own experience and observations, was the potential for stigmatisation when implementing literacy interventions in Key Stage 2, potentially meant that I could have focused more attention towards these impacts in the context of MHWB interventions. Though study interview guides (see Appendix G) were not tailored towards these interests, it was possible these could have become a focus of attention.

To mitigate the potential for these interests unduly impacting on the data collection, I was aware of these at an early stage and ensured that interview guides were developed based on extant literature (and limitations of this literature). As it transpired, stigmatisation frequently formed the basis of discussions both directly and indirectly in interviews with both staff and pupils, reflecting the relevance of these factors also supporting the extant literature (e.g. Gronholm et al., 2018; Lupien et al., 2013; Rapee et al., 2006; Weems et al., 2015; Werner-Seidler et al., 2017).

Considering the above point, the potential for these interests unduly impacting on the data analysis was also a key thought that was documented in the positional reflexivity notes. However, steps were taken to mitigate the potential for these interests influencing the analysis process through the use of a comprehensive coding framework, developed as part of the thematic analysis, leading to the development of the coding tree. This framework ensured that the themes that were generated and formed substantial sections of the following chapters were initially coded based on frequency of occurrence and were cross-checked by the supervisory team.

However, I could also have considered myself an ‘outsider’, specifically to the Welsh education system, as my previous experience was in England. My potential outsider status could be viewed as a useful counter-balance to the influences documented above, due to my positionality (Lichterman, 2017). For example, my comparative lack of knowledge regarding the ongoing and planned changes to the Welsh curriculum (see Chapter 2 for a recap) meant many of my observations, inferences and reactions to interview conversations could be considered de-contextualised, therefore creating more of a balanced perspective. As Adler and Adler (1987, p. 17) note, there exist dangers of over-familiarity which might reduce the ‘analytical perspective’ of the interviewer, and this was something I was very keen to avoid by utilising the mitigation strategies documented above.

4.10. Conclusion

This chapter has outlined the research design for the study. It has introduced, situated and justified the critical realist ontology and epistemology perspective that has been adopted. An instrumental case study was adopted (Stake, 1995), operationalised to identify a specific, bounded supra-system of study. The aims of this type of case study are to generate theoretical ideas about how the development, transmission and enactment of MHWB policy messages affect intervention practice and pupil experience. The sampling process was documented. A combination of purposive and chain-referral (Naderifar et al., 2017) sampling were used to identify and recruit policy, regional and community stakeholders. Exploratory variable sampling was used to identify relevant schools within two stratified local authorities in a diverse educational consortia local to the research office. At the school level, purposive sampling was used to sample and recruit staff and pupils.

In-depth qualitative, semi-structured interviews were used across the data collection for PRC stakeholders and school staff. Interactive interviews underpinned by the mosaic approach (Clark and Moss, 2001) were conducted with self-selecting pupil friendship pairs. Ethical processes were covered. Informed consent process (for adults) as well as age-appropriate assent and parental opt-in/opt-out (for pupils) were outlined and justified. Processes regarding data storage, confidentiality, anonymity and the minimisation of risk of harm were provided. Finally, the abductive thematic analysis approach (Braun and Clarke, 2019, 2006) was outlined and key reflexivity considerations were discussed. Table 17 documents how each data set provided the basis for the following empirical chapters:

Dataset	Application to empirical chapter
Interviews with policy, regional and community level stakeholders	RQ1: What policy messages are developed by policy, regional and community stakeholders for school-based MHWB and how are these transmitted to schools at the community-school interface?

Interviews with school staff (senior leadership team, teachers and support staff, i.e. learning support assistants)	RQ2: How do school staff enact policy messages and how do these processes affect the implementation of MHWB interventions in schools?
Interviews with pupils from Key Stage 2	RQ3: How do pupils experience the practices of universal and selective school-based MHWB interventions in light of schools' recontextualisation processes?

Table 17: Application of each dataset to the three empirical chapters

Chapter 5: Examining policy, regional and community stakeholder practices: Hyperactivity in the development and transmission of school-based mental health and wellbeing policy messages

5.1. Introduction

The chapter investigates the origins of school-based MHWB policy messages and explores how policy messages are developed by stakeholders with policy-making remit and transmitted to schools at the community-school level interface by 'mid-level policy actors' (Singh et al., 2013). It attends to the following research question:

What policy messages are developed by policy, regional and community stakeholders for school-based MHWB and how are these transmitted to schools at the community-school interface?

The chapter commences by exploring how policy, regional and community (PRC) stakeholders develop MHWB policy messages, focusing on their justifications for school-based provision, how they construct the role of the school in intervening in child MHWB and the moral, legal and ethical pressures they confer on schools. It will trace how these justifications lead to the construction of specific policy messages relating to intervention strategy. Discontinuities between stakeholders with policy-making remit, and those who are charged with transmitting policy messages to schools, will be highlighted.

The chapter then progresses to focus on problematic inter-agency working between these two main groups of stakeholder. Instances of problematic inter-agency working are foregrounded to further illustrate tensions in both conceptualising how best to devise intervention strategy in policy messages, but also in practice. These accounts mostly featured inter-agency working between 'school collaborators', educational consortia and the Welsh school inspectorate (Estyn) and centred on how to define, measure and assess school-based MHWB provision.

Singh et al. (2013) categorised a particular type of stakeholder as a 'mid-level policy actor', and 'school collaborators' seemingly fitted into this categorisation. Located within the mid-levels of the supra-system case study, school collaborators were a group of (mainly) community-level stakeholders in non-policy making capacities. School collaborators became important to this study because of their centrality to schools, which afforded them significant remit and influence on school level enactment and intervention practices. Examples of school collaborators included external stakeholders from community and charitable organisations delivering MHWB intervention programmes, as well as healthy schools coordinators.

The chapter will explore the effect of policy messages developed relating to strategy, definitions, measurements and assessments of school-based MHWB interventions on the evidence base available for schools to access. The final section of the chapter will consider the transmission of policy messages, which is largely completed by school collaborators. The section will consider how the transmission of these messages create a climate of policy hyperactivity at the community-school level interface.

5.2. Theoretical approach

The dominant lens to consider and theorise system dynamics, and how they produce MHWB policy messages throughout the three empirical chapters is Greenhalgh and Papousti's (2019) three key emergent properties of a complex adaptive system: self-organisation, interdependencies and the sensemaking process. Participants' accounts at this level of analysis are specifically presented using the broad analytical umbrellas of interdependencies and sensemaking; self-organisation will feature further in discussion of school level implementation of policy messages via MHWB intervention programmes in the next chapter.

Interdependencies is used as an umbrella to explore the ways in which stakeholders at the PRC levels interact with one another to develop school-based MHWB messages, and theoretical concepts such as Ecclestone's (2012) conceptual confusion, Bernstein's (2000) transmission context and policy hyperactivity (Clarke,

2012; Dunleavy, 1987) will be used to explore these interdependencies, and how the interactions of stakeholders at the PRC levels of the supra-system affect the development and transmission of policy messages.

As explored in Chapter 3, each research question is divided up into areas for contextual inquiry that can map effectively on to the overarching conceptual framework, using Greenhalgh and Papousti's (2019) emergent properties of complex adaptive systems. The focus of attention for interdependencies is how the context of the outer setting affects the development and transmission of policy messages. The context of the PRC level of the supra-system is considered highly influential for the subsequent enactment of messages, which will be considered in the following chapter.

Likewise, under the umbrella of sensemaking, namely 'the process by which people, individually and collectively, assign meaning to experience and link it to action' (Greenhalgh and Papousti 2019, p. 2), a number of theoretical lenses will be used to explore PRC-level data. Key concepts such as boundary objects (Star, 2010; Star and Griesemer, 1989) and subjectivities and discourses (Cumming et al., 2013; Foucault, 1972) will feature within the analysis to connect patterns identified in the data to existing constructs in the literature. The main area of contextual inquiry for sensemaking is how intervention agents at the outer setting exert their influence over the development, transmission, enactment and experience of policy messages.

5.3. Justifications for school-based MHWB intervention

Participants' accounts across all three levels of the PRC level suggest they overwhelmingly considered schools the most appropriate setting for child MHWB provision and justified developing policy messages centralising schools as responsible for delivering this provision. This justification focused on two key themes: the rising need for clinical MHWB services in child populations, and perceptions of the emergent evidential link between interventions that boost mental health and wellbeing and improved academic attainment.

The majority of data presented in this chapter focus on participants from educational-facing roles, however in this section, stakeholders' justifications for school-based provision also focus on clinical stakeholders, e.g. those working in CAMHS and other child and community mental health services. This data is presented to suggest overwhelming justifications for situating MHWB provisions within schools from both educational and clinical based participants. Therefore the concepts of MHWB discussed in the majority of this chapter are focused on school-based, rather than clinical, MHWB interventions unless expressed otherwise.

Clinical participants were consistent in how they drew from their experience and observations of rising need for MHWB provision. These stakeholders were spending increasingly more time working on community child mental health services, though had an awareness of, and involvement in, school-based provision. For instance, Emma, a child psychologist in a primary mental health team, commented: *'We're talking about it continuously really, through lots of services.'*

Clinical participants also noted how clinical services were overstretched and how their current resources were inadequate to respond to the rising need for MHWB provision for children, and that effective, school-based provision was required. For instance, Ian, a clinical psychologist working for a school counselling service in an educational-facing role, noted: *'How many counsellors and therapists have we got, and it's still not enough.'* Another participant focused on an increase in CAMHS (Child and Adolescent Mental Health Services) and asked: *'Why are we producing so many children who require CAMHS services?'*

Clinical participants described how, from their conversations with children and young people in clinical settings, a *'critical reframe'* was necessary in where MHWB provision should be located for this population. These stakeholders, working across primary and community mental health teams, reported a dramatic change in the language and attitudes exhibited by their young patients. For instance:

It's been an eye opener, really, as to how open they [children and young people] are about mental health and mental health issues, but also how they don't necessarily want to have all this [service provision] in a hospital for

mental health. You know, it's about 'this is part of my life, and some days I have mental health issues, some days I have physical health issues. I don't want to have to go to the hospital or the doctors

(Justine, CAMHS representative)

Clinical stakeholders therefore perceived that children and young people no longer preferred to use MHWB services in the clinical environment (*'I don't want to have to go to the hospital or the doctors'*). These stakeholders reported how they responded to these changing preferences by considering how best to locate these services away from the clinic.

Perhaps the clearest justification for school-based MHWB provision resulted from both PRC participants' (from both clinical and school settings) agreement over, and awareness of, the emergent evidence connecting good mental health and improved academic attainment. Moving towards participants with more direct involvement in school-based provision, Frank, a teachers' trade union policy representative, noted he was aware of *'a fundamental link between mental health and wellbeing and a child's ability to learn.'* Frank discussed at length his experience as a schoolteacher and union representative, and in the quote below, he described his awareness of this link through an instance of a child who had experienced parental separation:

Because of my background in teaching, and also what our members are saying in schools, we understand that inexplicable link between pupils' mental health, emotional resilience, and their ability to achieve and experience success in learning and the broader sense.

(Frank, National teachers' trade union policy representative)

Awareness of the link between good mental health and academic attainment was shared by several stakeholders across the PRC levels, for example:

You can't educate a stressed brain.

(Dana: Senior public health officer, regional health board)

It all comes back: If a kid is not happy, they will not learn, they will not attain. And when it comes down to it, schools care about attainment. It isn't long in a primary until they have to do the testing. So the testing's coming along, they've got to do that testing. They don't want kids that are unhappy.

(Billy: School health promotion specialist, local health board)

And also, you know, a child's health will affect their learning. So if a child is not well-fed, well-nourished, you know, being looked after, having sleep ... and all that sort of thing, they won't be in a position to learn.

(Elaine: School health promotion specialist, regional public health team)

Key justifications were made by PRC stakeholders in both clinical and school settings regarding the need for school-based MHWB intervention, and stakeholders overwhelmingly agreed on these rationalisations. Stakeholders considered both rising and changing need for school-based provision, both from an epidemiological standpoint ('*Why are we producing so many children who require CAMHS services?*') and through perceptions of children and young people's changing requirements for MHWB services.

Strong justifications were given by non-clinical stakeholders in educational facing roles, who connected MHWB intervention with improved academic attainment ('*a child's health will affect their learning. So if a child is not well-fed, well-nourished, you know, being looked after, having sleep...and all that sort of thing, they won't be in a position to learn*'). The subsequent sections will present data from education-facing stakeholders from across all three PRC levels of the supra-system.

5.4. Obligatory choice: Moral, legal and ethical pressures on schools

This section establishes connections between stakeholders' core justifications for school-based MHWB provision and the pressure that participants, particularly at the policy and regional levels, placed upon schools to effectively intervene in child MHWB. The data suggest stakeholders cultivate an environment where expectations on schools are high and this manifests in significant pressure. The data will present

how schools are considered as having *'little choice now'* but to provide effective interventions for child MHWB.

Stakeholders' justifications produced myriad expectations that combined to create a strong policy message for schools to intervene. 'Obligatory choice' as a concept (Bennett et al., 2009; Sianou-Kyrgiou and Tsiplakides, 2009) can help researchers explore how much pressure is placed upon schools by these stakeholders. Obligatory choice refers to how personal agency is constrained, and 'choice' is rationalised and accepted in relation to wider influences (Mannay, 2019). In the context of this study, this section will present data to suggest schools agency is severely constrained, and choice whether or not to intervene is a misnomer; instead, schools are viewed as having to rationalise and accept this role due to the 'wider circumstances', namely the various contextual conditions (Pfadenhauer et al., 2017) relating to justifications presented for school-based MHWB intervention.

This section utilises Bernstein's (2000) model of transmission context to explore the development of the first key policy message of interest, namely the criticality of schools intervening in the mental health and wellbeing of their pupils. Bernstein's (2000) transmission context provides a useful analytical lens to establish the strength and cohesiveness of policy messages, and in particular the concept of the 'classification-framing dyad' will be operationalised to categorise and analyse the strength of policy messages developed by PRC stakeholders.

Classification refers to how some forms of knowledge and pedagogic styles are privileged over others (Larson and Marsh, 2014; Leow, 2011). A 'strong' classification signifies a tightly-bounded privileging of knowledge and pedagogic style, where 'contents are well insulated from each other by strong boundaries' (Bernstein, 1975, pp. 88-89). 'Framing' is defined as 'the locus of control over the selection, sequencing, pacing and criteria of the knowledge to be acquired' (Bernstein, 2000, p. 99). Applied to the analysis therefore, strongly-classified policy messages are those in which there is clear cohesion and agreement between policymakers. The strength of classification of these messages are moderated by the extent to which policy-making stakeholders developing messages have and exert

control (framing) over what is to be communicated in the form of clear guidance for effective MHWB intervention.

The interpretation of this data suggests PRC stakeholders' justifications created moral and ethical expectations (Pfadenhauer et al., 2017) for schools to fill this gap in demand and resource limitations within clinical services. Obligatory choice in the form of moral and ethical expectations to intervene is built upon these contextual factors. Significant extracts from interviews with policy and regional stakeholders included:

*I think people recognise that it's [**MHWB provision**] such a fundamental part of what will be the new curriculum, that they know, even if they've [**school staff**] been at school and maybe haven't invested as much as others, they're going to have little choice now [...] And you say well, they haven't got a lot of choice, because actually, if that's what the child presents with in their classroom, they're going to have to deal with it in some way.*

(Frank, National teachers' trade union policy representative)

*You know, it [**responsibility**] always seems to lie with the school. 'What are you going to do about it, what is going on?'*

(Dana: Senior public health officer, regional health board)

The expectations, not just of government, but expectations of parents, expectations of pupils, are constantly going up, with less money to deliver it on. You know, you've got to get to a point where you just say I can't do that ... So they're constantly being scrutinised ... to the point of distraction sometimes.

(Geraint: Early intervention and prevention services, regional organisation)

Rising moral and legal pressures on schools to intervene in the MHWB of their pupils were clear from this section of data analysis. Schools were considered as having 'little choice now' but to intervene, and that they are morally required to respond in situations of children 'presenting' with mental and emotional health concerns. Where Frank and Dana were clear on the locus of responsibility being with schools, Geraint

was perhaps more reflective of the potential dangers of too much scrutiny that might arise with a shift in focus.

Stakeholders reflected on a shift in legal responsibility for schools to intervene, resultant from changing inspection frameworks now covering 'wellbeing' provision (Estyn, 2017). In 2017, Estyn, the Welsh school inspectorate, produced a new 'Common Inspection Framework' which extended inspections of schools to include MHWB interventions focused on child wellbeing. Effective MHWB interventions were therefore considered key for schools to locate and implement, with this now constructed as a '*duty*' rather than non-statutory pressure:

They [schools] have a responsibility for promoting the physical and mental wellbeing of the child. Under their Estyn inspections they are asked about some of these things, so they have that duty to do it as well.

(Elaine: School health promotion specialist, regional public health team)

The data presented above document pressures faced by schools to provide effective MHWB intervention provision from a moral, ethical and legal perspective.

Stakeholders particularly from the policy and regional levels of the supra-system refer to moral and ethical pressures of '*responsibility*', which have led to a legal '*duty*' which schools face to provide effective MHWB care for pupils. Using Bernstein's 'classification-framing dyad' (Bernstein, 2000), moral, ethical and legal pressures combine to create a strongly-classified (clear cohesion and agreement between PRC stakeholders) and strongly-framed policy message (clear knowledge to be acquired by schools) (Bernstein, 2000).

Schools therefore lack control over policy provisions, and these messages can be analysed using the lens of obligatory choice (Bennett et al., 2009; Sianou-Kyrgiou and Tsiplakides, 2009), where schools' options and organisational agency (Giddens, 1984) at the pedagogic level are very much narrowed to account for clear directions from PRC stakeholders. Stakeholders' accounts in this section created a fundamental need for school-based intervention and were founded by the participants' justifications presented previously. A clear responsibility and remit for

schools to intervene to promote the mental health and wellbeing of pupils was therefore established.

5.5. Conceptual confusion and conflict: developing weakly-classified policy messages

Where the data presented above documented strongly-classified policy messages regarding the importance of school-based MHWB intervention, data showcased in this section suggest that policy messages regarding how schools most effectively promote the mental health and wellbeing of their pupils are much more weakly-classified and weakly-framed. This section will draw connections between the above constructions of the school role, the subsequent pressures placed on schools with the subsequent development of policy messages relative to school-based MHWB intervention strategy.

The majority of interviews with PRC stakeholders resulted in discussions of school-based MHWB intervention strategies. This section will again draw on the classification-framing dyad of Bernstein's (2000) transmission context to interpret the data. As well as applying the classification-framing dyad to data analysis and presentation, this section also looks to explore the extent of which 'conceptual confusion' (Ecclestone, 2012) exists at the PRC levels of the case-study supra-system. Conceptual confusion is defined by Ecclestone as how conflicting agendas of different interest groups 'compete to define a problem and offer particular solutions' (Ecclestone, 2012, p. 469).

This section will outline how conceptual confusion arises between policymaking stakeholders and community-level participants, specifically regarding how schools should best intervene in the MHWB of pupils. Two key polarities are presented which lead to the creation of weakly-classified messages: policy and regional stakeholders' agendas are very much centralised around the development of 'character education' in pupils, whereas stakeholders predominantly at the community level focus on organisational-level intervention approaches. Together these messages create 'conceptual confusion' (Ecclestone, 2012).

5.5.1. Policy and regional stakeholders' agendas: centralising character education

Data from interviews with stakeholders with policy-making remit within their professional roles¹⁰ led to the identification of a consistent theme, notably the centralisation of 'character education' in strategic thinking. Policy and regional stakeholders' agendas were focused on pupil behaviour change, character and self-regulation. The following passage is from Harry, a government stakeholder for mental health and wellbeing. Their focus was on teaching individual-level strategies to primary school learners, and was based on the broad conceptual approach of character education:

As part of identifying emotions; as part of identifying actually what is pro-social and not pro ..., you know, anti-social, whatever, behaviour. What is a healthy relationship? What is an unhealthy relationship? Actually what you're bringing out, within that, is an understanding in the learner. Actually what is a social norm; what is, what is, what is pro-social, and actually, where there are issues ... actually at this point I need to seek help, either for myself or for somebody else

(Harry: Government stakeholder for mental health and wellbeing)

Similar agendas for intervention strategy were forwarded at the regional-level within stakeholders with policy-making remit:

At primary school age they're far more, er, open, they're far, they're far easier in the main to actually deal with. And I won't say coerce, that's the wrong word, but trying to get a child to actually see right from wrong, to deal with their own issues

(Geraint: Early intervention and prevention services, regional organisation)

Research into the conceptualisation of mental health and wellbeing policy in England suggests policy has taken influence from this pedagogical perspective (Brown and Carr, 2019), which entails developing the cognition, character and behaviour of the

¹⁰ These participants were predominantly policy-level stakeholders but also featured a few at the regional-level with policy making remit.

individual learner, and is often conceptually connected with individual-level narratives of 'grit' and 'resilience'. Similarly, previous research has highlighted the strategy of individualising responsibility (Brunila and Rynänen, 2017; Schrecker, 2013) at governmental level in public health contexts, an umbrella under which character education can be situated.

Ultimately this perspective centralises responsibility on individuals for supporting their own mental health through the development of character, and has been critiqued by educationalists including Brown and Carr (2019) for reinforcing 'ideal' and 'deviant' learner dichotomies through mental health narratives, particularly where governmental documents conflate 'mental health' and 'behaviour'.

Accounts presented above suggest that these stakeholders considered school-based MHWB provision based on the foregrounding of character education, particularly the development of pro-social norms, behaviours and relationships (*'actually what is a social norm; what is, what is, what is pro-social, and actually, where there are issues ... actually at this point I need to seek help, either for myself or for somebody else'*) was the most effective intervention strategy. Analysing the culmination of these accounts into one broad agenda, data presented in this section suggests that responsibility for the development of this character is to be located at the individual pupil level.

5.5.2. School collaborators' responses to 'fixing' individuals

During discussions around the most effective school-based MHWB intervention strategies, a key stakeholder group established itself as important in the development of policy messages. The group, labelled during the data analysis as 'school collaborators', became very prominent for several reasons, and their influence on the development and transmission of policy messages extended far beyond the specifics of this section. Their influence will be subsequently traced throughout the development and transmission process.

Whilst we have seen consensus related to PRC stakeholders' justifications for school-based MHWB, school collaborators' strategies for best intervention practice can be analysed as in significant opposition to policymakers' strategies. Where policymakers' MHWB approaches centred on individual-level notions of pro-social norms and the prevention of anti-social behaviour in the school setting, producing the message that pupils needed to '*deal with their own issues*', school collaborators instead reported how they broached these strategy issues with schools.

Although school collaborators did mention the importance of individual-level social-emotional competencies – such as listening and helping skills – skills that could be categorised in line with policymakers' ideas of 'pro-social' behaviours, school collaborators were keen to distance themselves from discourses of 'fixing individuals'. In their accounts, the fundamental foundations for developing effective school-based MHWB interventions were the development of healthy environments first and foremost.

Their accounts instead centred on how resilience and positive mental health should be developed instead according to globalised health promotive narratives, such as the WHO Healthy Settings approach (World Health Organisation, 1986; World Health Organisation and WHO Global School Health Initiative, 1996). This entailed creating healthy settings within schools, and central elements of this included the cultivation of '*opportunities*' and '*valuing relationships*'. Individual-level, resilience-focused strategies based on character education and the individualisation of responsibility were therefore considered unhelpful, and were considered conceptually divergent from school collaborators' priorities in developing the healthy environments where inter-personal relationships were foregrounded.

Although these participants acknowledged the importance of diagnosis and treatment from an upstream, early intervention and prevention perspective, they refuted how these concepts were conceptualised in policymakers' MHWB intervention strategies. For instance, collaborators contested the utility of '*fixing*' individuals, noting this approach was '*not the most important thing in helping children develop skills and emotional health*'. School collaborators, when asked about how they talked to schools about MHWB interventions, noted:

You know, because I say to schools, you just can't say to someone, 'oh, toughen up', you know, 'you need to have a bit of resilience and bounce back or whatever'. You, you've got to create the opportunities for that to happen.

(Dana: Senior public health officer, regional health board)

Ian, who worked for a third-sector organisation regularly involved in delivering and advising schools on implementing MHWB interventions, elucidated how schools could create these opportunities highlighted by Dana in the quote, above:

The mind is not a simple thing, but it's probably the most, one of the most important things: valuing relationships, hugely important, listening, helping, listening skills, understanding other people. You know, all those things, tied up, you know, to creating healthy environments rather than fixing individuals, you need to create those absolutely healthy environments.

(Ian: Clinical psychologist lead, community school counselling service)

Divergent agendas for best practice intervention strategy highlighted in the above narratives suggest that where initially, strongly-classified and strongly-framed (Bernstein, 2000) policy messages regarding the importance of school-based MHWB and the role of the school in intervention are present, these were potentially undermined by messages relating to strategy, which from these accounts can be considered weakly-classified and weakly-framed. Weakly-classified messages were evidently produced from disagreements and divergences, and it is contended that a high degree of conceptual confusion (Ecclestone, 2012) exists at the PRC levels of the supra-system, and this in turn contributed significantly toward the production of weakly-framed messages, where PRC stakeholders as a whole seemingly could not exert control over the knowledge schools needed to acquire in order to enact these policies at the pedagogic level, with implications for school partnerships.

The confusion and conflict between stakeholders in multi-agency interactions was particularly evident from stakeholders' divergent sensemaking processes (Greenhalgh and Papousti, 2019) regarding intervention strategy - considerable discord regarding how best to promote pupil MHWB provided a focal point for how these different sensemaking processes created fractural interdependencies,

particularly between policy-making participants and 'school collaborators'. In these accounts, the foregrounding of character education and the individualisation of responsibility by policy-making stakeholders worked in direct opposition to school collaborators' ideas of the cultivation of healthy settings. Taken together as one, this discord created a weakly-classified, and also weakly-framed policy message, and provided insight into how the supra-system at these levels was not working as effectively as possible.

5.6. School collaborators' accounts of problematic inter-agency working

Where previous sections focused across the range of stakeholders, accounts of inter-agency working are centred on data from school collaborators. These stakeholders operated at the regional and community levels, and unlike other stakeholders featured in the analysis, had no policy-making remit, however had a substantial role working directly with schools, and advised and advocated for them. One of the central practices arising from strongly-classified and strongly-framed policy messages has been the proliferation of calls for inter-agency alliances centred on strategising effective approaches for school-based MHWB provision.

This section will explore how policy messages are developed as a result of inter-agency collaborations at the interface of policymakers and school collaborators, and will further analyse the data in relation to transmission context (Bernstein, 2000) and conceptual confusion (Ecclestone, 2012). The first part of this section will present a more generalised case of frustrations regarding inter-agency working from the perspective of school collaborators, and suggests a feeling of disenfranchisement where other statutory agencies excluded them from exercising their expertise. The second will provide an illustrative window to interrogate inter-agency tensions via the definition, measurement and assessment of school-based MHWB provision.

The focal point for this section is contestations over the inspection and assessment of school-based MHWB interventions. Similar to the tensions underlined regarding how to develop effective strategy, the data presented in this section suggest that these disagreements had both conceptual and practical significance. Where the data in the previous section, highlighting tensions between policymakers and school

collaborators, were not contextualised in relation to one another, that is that stakeholders did not directly refer to one another in their accounts, this section provides a more in-depth exploration of participants' accounts of direct disagreements at the interface of the PRC levels.

The Foucauldian notions of subjectivities and discourses are applied to this section of the analysis, attempting to provide a more nuanced understanding of how these policy messages are shaped, the agendas that prevail and dominate the construction of messages, and who these originate from. Cumming et al. (2013, p. 224) refer to a Foucauldian reading of 'discourses' as 'codified patterns for naming and discussing things' that can both depict and create 'the objects and subjects of which they speak' (Foucault, 1972, p. 49). Discourses can be hegemonic, having a 'decisive influence on a specific practice' (Dahlberg et al., 2007, p. 31) and within this, either repressive - creating a climate where alternative ways of thinking and practising are impeded - or productive.

'Subjectivities' are the constructed 'ways of being' (Cumming et al. 2013, p. 224, citing Dahlberg et al., 2007, p. 23) which contribute to the shaping of either hegemonic or productive discourses. As well as focusing attention on 'ways of being', this lens can be extended to consider ways of thinking and how subjective philosophies and conceptions affect the development of policy messages. The focus of this section is on school collaborators' accounts of working with the school inspectorate, Estyn, and one of the educational consortia with overview for educational policy in the local authority of interest to the case-study. This section will explore two illustrative examples of where inter-agency tensions, particularly between organisations and individuals operating at the policy and community levels of influence, arose.

5.6.1. Barriers to collaboration

School collaborators shared their exasperations with how they felt the school inspectorate, Estyn, contributed to inter-agency collaborative strategy for school-based interventions. One participant had particularly interesting positionality within the supra-system and this arguably afforded them unique insight and perceptions

into how they thought the inspectorate operated in this domain. Indeed, John was a researcher and school improvement specialist at a university with experience working with one of the educational consortia alongside the government. On the topic of Estyn's role in inter-agency collaboration on school-based MHWB provision, he noted:

Estyn I think are really problematic in relation to, they've been brought up in this culture, here, in particular I think they have a very narrow view of what they do. They've been invited along to some of the things I was doing with Welsh Government. I did some work with Welsh Government, and I tried to get Estyn involved, and they wouldn't even talk in the sessions. They just wanted to sit there and write notes, as if that was some sort of, you know, as if that was their role. Yeah, and it's like, you know, grow up, you know?

(John: University researcher)

John's account cast Estyn as uncollaborative within inter-agency discussions around school-based MHWB ('*they wouldn't even talk in the sessions*'). Likewise, another school collaborator, Billy, a specialist responsible for advising schools on effective approaches for health promotion including mental health and wellbeing, described a lack of communication, where agencies worked in silo. This was seen to culminate in a lack of joined-up strategy for MHWB provision in schools, with agencies such as hers looking to engage, without reciprocation from the educational consortia:

I would love you to interview someone from the consortia and ask them why they're not communicating with us. And, I ... they must know about [organisation name redacted], there's no way they don't know about us, but we are trying our best to, to involve them and, and to find out what they're doing

(Billy: School health promotion specialist, local health board)

Here, Billy was unable to give the benefit of the doubt to who she saw as uncooperative agencies. Lack of engagement in multi-agency intervention strategy for school-based MHWB was perceived as intentional, particularly as Billy viewed her organisation as prominent in the field of health promotion and therefore

inconceivable not to encounter within the context of inter-agency collaboration (*'there's no way they don't know about us'*). The data presented in this section build on some of the conceptual disagreements over how to build pupil MHWB in the school setting, the inter-agency tensions in this section pointed more towards how school collaborators' reported feeling disenfranchised by these relationships.

5.6.2. *'Attendance, attendance, attendance'*

School collaborators shared their frustrations within inter-agency working dynamics on the subject of defining, measuring and assessing school-based MHWB provision. This topic was a particularly prominent example of how inter-agency working in the development of school MHWB intervention strategy was inadequate. For instance, in one conversation about school collaborators' experience working with Estyn, the subject of the recently developed Common Inspection Framework arose, where pupil 'wellbeing' has recently formed part of the inspectorate's focus for schools. Reflecting back on the data above, this has culminated in legal policy imperatives and strongly classified and framed policy messages (Bernstein, 2000) for schools to provide effective school-based MHWB provision. Stakeholders on this topic noted:

But you know, the thing with Estyn is, I asked the lead inspector for wellbeing what his definition of wellbeing was and he couldn't tell me. And, and also, how do you know, the other thing about Estyn is how do the ensure that all their inspectors share the same definition and the same judgement and assessment of wellbeing?

(Dana: Senior public health officer, regional health board)

The biggest cry we have from schools, is that they say, 'oh, we're so fed up because the inspector didn't even ask us about [organisation name redacted], which is just unbelievable, and this is NQA level schools. They say, 'we don't, we haven't even been asked,' you know, and you're like ... or, or they, or a school, I've heard one school say, 'oh, well we got the NQA,' but then the inspector said, 'well, it's up to me to decide how you are on wellbeing'.

(Billy: School health promotion specialist, local health board)

Here, collaborators questioned the effect of the lack of a clear definition of wellbeing on the objectivity and fairness of school-based MHWB assessment (*'how do they ensure that all their inspectors share the same definition and the same judgement and assessment of wellbeing?'*). The most vocalised and contentious of inter-agency tensions were considered in the context of measuring pupil wellbeing. The next section of data provides a strong documentation of school collaborators' frustrations, particularly with Estyn in inter-agency collaborations related to assessing school-based MHWB approaches. School collaborators' frustrations focused particularly on Estyn's use of pupil attendance figures as a proxy measurement for good wellbeing:

It isn't just about attendance and attainment, because there are, there are schools that have what seems to be quite low attainment and attendance but are doing a very large amount of work because of the demographics they have.

(Billy: School health promotion specialist, local health board)

We had high hopes when they changed it last time, because they changed it previously and included more wellbeing, so we all got a bit excited going, this is fantastic, but how that actually looked in reality was, wellbeing was very much down to attendance ... So if they had poor attendance in a school, they would not get scored highly for wellbeing... So, I don't hold out massive hopes but it can only get better?. They do seem to be talking about it a little bit more, but in reality I don't know what that looks like yet.

(Laura, School health promotion team leader, local health board)

What happened originally was that if you didn't meet a certain attendance target, your overall wellbeing judgement couldn't be anything other than adequate, it was adequate or below. So, you could be doing the most fantastic wellbeing stuff, but for whatever reason, that year your target was missed, and I, from my school particularly, they were a small school, I had one year where our target was 95%, 96% or whatever it was going to be. I had a three-week period before Christmas, where we had terrible stomach upset in the school. We were sending kids home because they were coming in and being sick. And of course, you've got to have 48 hours before they

came back. And I had sub 70% attendance. And to be fair to parents, they were bringing them into school, we were sending them back home. That screwed me for the year. Now the idea that that was a reflection of the wellbeing was bonkers.

(Frank, National teachers' trade union policy representative)

School collaborators' narratives suggest that these definitional and assessment climates were subject to random, non-evidence-based decisions and changes, often based on the impulses an individual or group of individuals. The logic of using attendance as a key measurement tool for the wellbeing of school pupils was questioned and criticised by school collaborators. One participant noted that positive school environments are facilitators for attendance, and this in turn for improved academic outcomes but less so where student wellbeing is concerned. Instead she critiqued the logical and conceptual basis for the choice of metric for measurement, recounting an experience she had with a school who were being inspected:

Dana: And, and for example, I've got ... I had one school where they had Estyn in and they were given a really hard time about attendance because it was under 95% and it was mainly because the pu... one of the pupils um, her mother was dying of cancer and the school felt that she needed to be at home, having some really great experiences as a family for the remaining time that, that mum had.

Steve: Yeah.

Dana: And mum did even ... mum did die and the child returned to school and, and the school has been fantastic in supporting her and ... but Estyn gave them a really hard time about that. Now, for me, when you talk about mental health and wellbeing of pupils, to, to ... the best thing the school could have done for that child is say, 'go home and be with your mum ...

Steve: Yeah.

Dana: ... go home and be with your family,' yet Estyn come in and say, 'no, the child should be ...' attendance, attendance, attendance. So, I think you're right, I think there's a lot of platitudes and a lot of acknowledgement that these things are important, but the system needs to reflect it, and I, I don't think we're there yet.

(Dana: Senior public health officer, regional health board)

School collaborators' accounts as reported in this section suggest the existence of significant inter-agency tensions, particularly at the interface of policymaking organisations at the policy and regional levels (Estyn and educational consortia) and school collaborators, primarily operating at the community level. Frustrations were highly prevalent across many collaborators' accounts and were feasibly resultant from feeling disenfranchised in inter-agency meetings regarding school-based MHWB intervention strategy. School collaborators viewed these organisations as uncommunicative, working in silo and overtly disregarding their own professional expertise.

Moreover, considering discussions around defining, measuring and assessing 'wellbeing' by the school inspectorate, catalysed by novel efforts to integrate pupil wellbeing into existing inspection frameworks, there existed large-scale disagreements on the part of collaborators regarding the current approaches into wellbeing provision assessments. Key areas of contention included collaborators' perceptions of Estyn as whimsical and subjective. For these participants, Estyn provided no clear definitions of 'wellbeing', and current assessment criteria for inspections were dominated by '*attendance, attendance, attendance*'. The effect of this at the inspectorate-school interface was viewed as detrimental: schools were viewed as being unfairly punished for poorer attendance figures, even where they had justifiable reasons for pupil absences ('*now the idea that [attendance] was a reflection of the wellbeing was bonkers*'). In these accounts Estyn inspectors were portrayed as immovable in their subjectivities.

The data presented in this section echo Braun and Maguire's (2018, p. 3) critique of the dominance of quantification and measurement of outcomes over 'child-centredness' in primary school contexts in England, suggesting similar processes

exist in the Welsh context. Moreover, in their study of policy enactments in primary schools, Braun and Maguire (2018) found primary school staff were 'second-guessing' policy due to shifting assessment regimes. Empirical data from this study suggest school collaborators are attempting to do the same.

These data also highlight that disagreements between policy-making stakeholders at the policy and regional levels of the supra-system extended beyond Ecclestone's (2012) theory of conceptual confusion, in this case applied to where system actors compete to provide solutions to their constructions of MHWB intervention need at the primary school level. Accounts instead suggest a deeper level of discontinuity and inter-agency conflict. A further analysis can be applied to school collaborators' accounts using the Foucauldian lenses of discourses and subjectivities. Codified patterns, or 'discourses', of meaning relative to defining and measuring pupil wellbeing were considered consistent by school collaborators – policymakers from Estyn created a 'decisive influence on specific practice' (Dahlberg et al., 2007, p. 31), and this culminated in 'wellbeing' assessments primarily determined by attendance.

From collaborators' accounts it is contended that hegemonic discourses (Foucault, 1972) were created by policymakers' subjectivities, with schools and collaborators being told *'it's up to me how you are on wellbeing'* by the inspectorate. Policy messages relative to the assessment of school-based MHWB are therefore at the moment governed by hegemonic discourses with policymakers' subjectivities of the ways of being and practising creating major frustrations in school collaborators' accounts. Though data in this section focus only on collaborators' accounts and therefore do not include policymakers' perspectives, the existence and communication of these dominant discourses could potentially explain why school collaborators felt disenfranchised and excluded from meaningful inter-agency collaboration around school-based MHWB intervention strategy. A 'productive' discourse instead would be one where collaborators felt included in these dialogues and decision-making processes.

It could be further contended that policy-making stakeholders sought to retain the locus of control over the direction of assessment messages (Bernstein, 2000),

creating as strong a framing as possible for these particular messages which were less collaboratively-developed compared with policy messages relative to intervention justification. These ideas are in contention, however what becomes clearer through analysis of this data is that pupil 'wellbeing', when examined through the lens of inter-agency working can be considered a 'boundary object' (Star, 2010; Star and Griesemer, 1989). This concept applies where the 'object' – in this case 'wellbeing' – has sufficient commonality of reference and coherence as to be understood sufficiently to permit working across disciplines and agencies, but with enough 'interpretative flexibility' – subjectivism over how to understand the concept – to create divergences and tensions. In the case of this data, these divergences apply both to stakeholders' understandings and constructions of 'pupil wellbeing' and how these constructions are practically applied to assessment of school-based provision.

School collaborators' accounts that policymakers exercised great subjectivity in how they approached school-based MHWB interventions ("*attendance, attendance, attendance*") produced extremely unpopular evaluations by these stakeholders. Data suggest these stakeholders were second-guessing policy in the face of shifting assessment regimes (Braun and Maguire, 2018) which were hyperactive in nature. It is contended that subjectivities of policymakers created hegemonic, rather than productive, discourse, and this production feasibly contributed toward further fractures in interdependencies, again due to significant differences in stakeholders' sensemaking practices (Greenhalgh and Papousti, 2019). Hegemonic discourses precluded community-level participants from contributing to the framing of pertinent policy messages.

5.7. Conceptual confusion creates policy hyperactivity

Accounts presented in this section suggest the conceptual confusion and conflict inherent in approaches to defining, measuring and assessing school-based MHWB provision significantly affected the information available to schools regarding effective ways to develop and implement interventions. Data are explored using the analytical lens of policy hyperactivity (Braun et al., 2010; Dunleavy, 1987; Leow et al., 2014). Policy hyperactivity is considered the 'multiple policy demands and expectations' (Leow et al., 2014, p. 992, citing Braun et al., 2012) on schools by

policymakers. Likewise, Ball et al. (2011b, p. 627) refer to how educational policies which manifest as a “collection code” of unconnected bits and pieces, with no principle of integration’ cannot be effectively integrated into school systems.

This section therefore comprises of the final exploration around the development of school-based MHWB policy messages with subsequent sections focusing on how these messages are transmitted at the community-school interface. Policy hyperactivity is operationalised to explore the effects of the combination of both strongly- and weakly-classified policy messages (Bernstein, 2000) presented in sections above, and in the context of this thesis can be applied to understand school collaborators’ accounts of the quality of information and advice available to schools regarding effective MHWB approaches. School collaborators’ accounts prominently relayed examples of the *‘bombardment’* of schools by myriad MHWB intervention providers. Stakeholders used similar discourses to describe this bombardment, including how schools were being *‘hounded’* and *‘overwhelmed with initiatives’*. One example from the data included:

There are so many, programmes and companies out there who are literally hounding schools, to say, you know, we can do this. We will make this element of the curriculum for you. Pay us X amount of money, and we’re good to go.

(Andrea, Public health practitioner for mental and emotional health and wellbeing)

Schools were perceived as being *‘hounded’* by opportunist organisations whose approaches to school-based MHWB were marketed to them as silver-bullet solutions, promising to construct any element of the curriculum at a cost. Whilst stakeholders exhibited favourable opinions on the quality of current MHWB provision, noting how there was *‘so much good work’* being delivered for primary-aged children in schools, it was noted that the bombardment of schools by myriad external agencies prevented senior leadership teams (SLTs) in schools from having a clear understanding of whether interventions were effective, and whether they *‘achieved what it says on the tin’*.

Moreover, stakeholders working across both school-based and clinical service provision noted the difficulty of trying to identify and map the vast body of interventions currently delivered in schools. They talked of how *'everybody is trying to solve this problem... burgeoning emotional, mental health problems'*, leading to a difficulty in understanding the system. From a clinical perspective stakeholders considered this complexity made it difficult for those working in school-based referrals to direct young people to the right service.

Other practical effects of the over-saturated intervention 'market' arose in school collaborators' accounts at regional and community levels. Schools were perceived as making frequent decisions to trial many, and often subsequently drop, new MHWB programmes. One stakeholder, Dana, a senior public health officer, described this process as *'dabbling'*, which she felt could in some cases have positive short-term effects with specific year cohorts, but could also prevent the catalysis of long-term system-level change across the school structure. Dana perceived long-term system-level change as a requirement for sustained commitment to delivering interventions, specifically the investment of senior leadership teams and a whole-school focus:

It's about changing culture and ethos. So not having temporary short-term projects and initiatives that come along, have an impact for a month or two. You know, what works with [organisation name redacted], what we know really does change the culture and ethos of the school, and I think ... schools will welcome it because they're bombarded with things.

(Dana: Senior public health officer, regional health board)

Resultant intervention practices such as stakeholders' accounts of schools' *'dabbling'* in many new MHWB programmes, and a lack of clarity at the clinical-educational interface, where health professionals were unable to identify clear pathways for referrals, were two clear effects of how conceptually confused and conflicted, weakly-classified, policy messages resulted in a culture of hyperactivity.

Reflecting on participants' accounts in this section of the data, it is considered that a climate where schools were considered by collaborators as pressured by myriad intervention providers created a substantial barrier to effective school-based MHWB

provision as the over-abundance of programme choice made it difficult for school SLTs to ascertain the best approach based on the available information. This data support the existence of a hyperactive development of policy messages which are characterised by a complex combination of both strongly- and weakly-classified policy messages. The existence of policy hyperactivity in this case seemingly undermined the '*good work*' being delivered due to an over-generation of interventions. These weakly-classified and weakly-framed messages provided a lack of direction for schools and further undermined the strength of clarity (framing) and conceptual agreement (classification) of policy messages relating to the imperative for intervention and the school's role in intervening.

Reflecting on Greenhalgh and Papousti's (2019) emergent properties of complex adaptive systems, interdependencies as a facilitating tool for an effective complex adaptive system can therefore be viewed as the effective functioning of the system in regards to developing clear, strongly-classified policy messages which could be efficiently transmitted at the community-school level interface. In this regard, cohesive interdependencies were undermined by conceptual confusion of messages regarding intervention strategy and assessment.

5.8. Transmitting hyperactive policy messages at the community-school interface

Having theorised the potential effects of developed policy messages on schools' ability to access critical information about the most effective MHWB interventions, the data in this section focus on how school collaborators transmit hyperactive policy messages at the community-school level interface. Stakeholders' professional identities, particularly as self-declared defenders of public health medicine, are foregrounded in this analytical section, and are used to explain how school collaborators play gatekeeper to the evidence base for school-based MHWB interventions.

In the subsequent presentation of data, it is clear that collaborators have a distinct and important role in the supra-system, particularly at the community-school level interface. The following comment infers further the climate of hyperactivity, however

the key focus of interest is on how these stakeholders provided a gatekeeper role to the evidence base:

Everyone across Wales is a different um, background. So, I'm very much public health, I'm very into evidence. Where some people, no offence to them, but they wouldn't necessarily go ... they're not public health trained ... We don't necessarily want loads of agencies coming in.

(Billy: School health promotion specialist, local health board)

Untrustworthy 'waifs and strays' were often considered those with significant corporate influence, for example Dove and the Church of Scientology:

Here's an example, right, of one that we don't promote, and we've looked into it and have been unhappy to promote it, is the 'Dove Self Esteem' program. So, Dove is the, you know, the Unilever um, you know selling soap and whatever... There's an organisation called Narconon which is um, funded by Scientology and they were sending things to all the schools, and I quickly, I was like emailing them all, do not use this stuff. And now schools are, are contacting me if they've got anything that they see as being a bit unusual.

(Billy: School health promotion specialist, local health board)

These participants used their identities as public health professionals to establish themselves as trusted agents, where schools could report any rogue providers to them. Perceived iatrogenic effects of non-evidence-based interventions were foregrounded as a further justification for collaborators' decisions as gatekeepers:

You know there is potential to do harm with some of this stuff so the right professional at the right time can make a huge amount of difference.

(Dana, Senior public health officer, regional health board).

School collaborators operationalised their identity as public health professionals as a way of legitimising their own intervention into the field of school-based MHWB. School collaborators showcased a collective identity as protectors of evidence-based practice in relation to school-based MHWB ('*the right professional at the right time*

can make a huge amount of difference’) and made judgements on external agencies and organisations offering pre-packaged, manualised interventions to schools, either categorising them as *‘waifs and strays’* or as genuine providers with the required credentials to approach schools with their programme suggestions, noting ultimately *‘we don’t necessarily want loads of agencies coming in’*.

These decisions were considered within a public health-oriented hierarchy of evidence. School collaborators’ responses could feasibly be considered as an attempt to contribute to how policy messages were framed, and are viewed within the context of feeling disenfranchised and powerless within inter-agency responses to strategising, defining, measuring and assessing school-based provision. They feasibly took this opportunity to act as ally and advocate to schools.

Asking schools to report rogue providers as well as acting as gatekeeper to the *‘right’* evidence, namely those with a public health orientation, underpinned by healthy settings, systems-focused approaches, collaborators looked to establish some control over the framing (Bernstein, 2000) of policy messages through the available evidence base, via their interactions with schools. It could be figured that this might have been at least partly in response to their feelings of disenfranchisement within inter-agency working, as well as their conceptual disagreements with policymakers’ approaches. The ultimate result is that policy hyperactivity resultant from conceptual confusion and conflict, created an extremely difficult transmission of clear, strongly-classified and framed (and therefore effective policy messages) at the community-school interface.

Conceptual confusion and conflict relative to strategy, definition, measurement and assessment of provision significantly affected the information that could be transmitted to schools regarding effective ways to develop and implement interventions, and these problematic interdependencies within the PRC levels of the supra-system led to policy hyperactivity. Hyperactivity is specifically useful as a concept to explain how myriad strategies, interventions and philosophies were *‘bombarding’* schools in school collaborators’ opinions. Here, various intervention providers were considered as competing to problematise and provide silver-bullet solutions to schools. Schools, instead of receiving clear guidance on best-evidence

approaches to improving the MHWB of their pupils, were considered to be overwhelmed with a multiplicity of different agendas. Policy messages, rather than staying strongly-classified, instead became a 'collection code' (Ball et al. 2011b, p. 627) of divergent, confusing and weakly-classified messages in collaborators' perceptions, precluding schools from effectively identifying relevant MHWB approaches from the evidence base.

5.9. Conclusion

Data presented in this chapter answered the first study research question:

What policy messages are developed by policy, regional and community stakeholders for school-based MHWB and how are these transmitted to schools at the community-school interface?

Reflecting on the key areas of inquiry relative to the chapter research question¹¹, the context of the 'outer' setting (Damschroder et al., 2009) of the supra-system of MHWB provision clearly affected the development and transmission of a number of policy messages. PRC stakeholders overwhelmingly agreed on strong justifications for schools to provide MHWB support to pupils. Resulting policy messages communicated moral, ethical and legal pressures on schools to intervene in the MHWB of their pupils. These messages were considered strongly-classified and framed (Bernstein, 2000), with participants' accounts suggesting a high level of cohesion and agreement as well as clarity of message between all three levels of stakeholder. However, initially strongly-classified messages relating to stakeholders' constructions of the school role were arguably undermined by significant policy hyperactivity resultant from conceptual confusion and conflict (Ecclestone, 2012; Cigman, 2012) relating to intervention strategy, as well as the definition, measurement and assessment of provision.

Intervention agents in the outer setting of the supra-system exerted their influence over the development and transmission. Reflecting on Greenhalgh and Papousti's

¹¹ See Chapter 3 conclusion for a recap.

(2019) 'sensemaking' definition of complex adaptive systems, evidence of discord and conceptual confusion and conflict between policymakers and school collaborators manifested in discussions of intervention strategy and assessment. Foucauldian ideas of 'discourses' and 'subjectivities' were utilised to analyse this data. School collaborators' accounts, suggested they conveyed significant frustrations with their interactions with the school inspectorate and regional educational consortia. These problematic interdependencies in the form of inter-agency tension within the PRC levels of the supra-system led to policy hyperactivity. Hyperactivity was specifically useful as a concept to explain how myriad strategies, interventions and philosophies were '*bombarding*' schools in school collaborators' opinions

The final section of this chapter explored how collaborators, uniquely positioned at the community-school interface, transmitted the hyperactive collection code of policy messages to schools. Collaborators responded to the collection code of hyperactive policy messages by operationalising their professional identities as public health professionals to influence as much as possible the evidence base, through the MHWB programmes available to schools.

Data from this chapter provide important insight into the development and transmission of MHWB policy messages. The research question provided a useful lens to explore the context of the 'outer setting' (Damschroder et al., 2009) of the supra-system, and how this context affects the development and transmission of messages. Within this question, consideration was given to how intervention agents at the outer setting of the supra-system exerted their influence over this process.

What is not known from this question is how the context of the outer setting of provision affects schools. The next chapter will therefore focus on schools' enactment of policy messages and how they establish their own intervention practices. This is required to theorise whether the development and transmission of current policy messages are facilitating effective development of MHWB interventions at the school level.

Chapter 6: Coping with hyperactivity: Schools' enactment of policy messages and effects on the implementation of interventions

6.1. Introduction

The previous chapter concluded that policy hyperactivity prevailed due the myriad of competing and contradictory policy messages developed and transmitted at the policy, regional and community (PRC)-school level interface. Where messages regarding the need for school-based provision were strongly classified (congruence between PRC stakeholders) and strongly framed (clarity of message), these were undermined by conceptual confusion (weakly-framed messages) and conflict (weakly-classified messages) particularly around strategy, definition, measurement and assessment of provision. This chapter will explore how schools enact these messages and 'cope' (Braun et al., 2011, p. 586) with the climate of policy hyperactivity. This chapter will respond to the following research question:

How do school staff enact policy messages and how do these processes affect the implementation of MHWB interventions in schools?

This chapter focuses attention on data from two schools: Holloway and Rangers. The contextual background of these schools is reported in Chapter 4. The chapter explores how these schools enact the MHWB policy messages developed and transmitted by PRC stakeholders. A policy enactment lens suggests that instead of mandating particular action, policies create conditions where options for decisions are narrowed or altered (Ball, 1994). The 'enactment' of policies is considered a creative process undertaken by schools where they often invoke different responses to 'cope' (Braun et al., 2011, p. 586) with policies from higher levels of educational supra-systems. Braun et al.'s (2011, p. 586) concept of enactment is considered useful for exploring how schools cope with hyperactivity including the 'creative processes of interpretation and translation', including the 'recontextualisation' from abstracted policy ideas to concrete, pedagogical practices.

The first section will focus on the complex interpretation of hyperactive messages where schools clearly accepted some messages, whereas others are rejected.

Accepted messages are those which were strongly framed and classified (Bernstein, 2000), by PRC stakeholders' justifications for school-based intervention. Schools engaged in a process of both acceptance and rejection where messages were less strongly framed and classified, or where they considered messages were not contextually-relevant for their unique context. This leads to schools often frequently trialling (and dropping) new interventions.

The second section will centre on schools' responses to messages by exploring their intervention practices. This section will investigate recontextualisation approaches against the backdrop of self-organisation. These elements will be used to explore systemic-level processes, with theorisations made regarding how and why certain policy messages are influential in school level MHWB intervention practices, as well as how intervention sustainability and effectiveness might be moderated and facilitated at the school level of educational supra-systems. Schools engage in three main recontextualisation practices in response to their acceptance and rejection of certain policy messages. Schools utilised the unique positionality of key intervention agents, specifically support staff trained in the 'Emotional Literacy Support Assistant' (ELSA) scheme. Schools also de-formalised and de-stigmatised the places and practices of MHWB interventions, resisting policymakers' messages of '*fixing*' individuals outlined in the previous chapter. In both sections, inter-school variations in practices will be highlighted and explained in reference to their interpretation of policy messages and schools' unique contexts.

6.2. Theoretical approach

Greenhalgh and Papousti's (2019) emergent properties of complex adaptive systems – interdependencies, sensemaking and self-organisation – will be used to frame the exploration of schools' enactment of MHWB policy messages. The first section will focus predominantly on system interdependencies between PRC and school levels. The interpretation of weak messages will be explored largely with reference to interdependencies and sensemaking processes. Schools' interpretation of policy messages are particularly important where there is weak classification and framing of the messages developed and transmitted by PRC stakeholders. Returning to the conceptual framework, the key area of inquiry for interdependencies is exploring how

the context of the outer setting (PRC levels) affect the enactment of messages and implementation of interventions by the inner setting (schools) of the supra-system (Damschroder et al., 2009).

Bernstein's (2000) theory of field is viewed as a useful lens to explore how school systems self-organise (Greenhalgh and Papousti, 2019), in response to their interpretation of PRC stakeholders' policy messages. The extent to which schools recontextualise messages as part of their enactment processes can be conceptually linked with the extent to which they exhibit self-organising properties. The contextual area for inquiry for self-organisation is how schools' mobilise their 'resources' (May et al., 2016) which include norms, rules, roles and material resources.

Schools' recontextualisation practices are linked back to schools' sensemaking processes, and the examination of these are critical to an understanding of whether schools are currently supported effectively to promote pupil MHWB. The section will establish connections between schools' interpretation and subsequent recontextualisation of key policy messages, why schools recontextualise certain messages and how these processes affect the practices of key MHWB interventions. The key area of inquiry regarding sensemaking processes is establishing how the context of the 'inner setting' (schools) affect the enactment of messages and subsequent implementation of interventions. Specifically within this context is intervention agents' professional, organisational, cultural and individual mindsets, norms, interests and affiliations (Damschroder et al., 2009).

Complementary theoretical lenses to aid data analysis, compatible with the overarching concept of policy enactments, will also be considered in this section. For example, Coburn (2005, p. 477) noted in a study on sensemaking and enactment that 'teachers come to understand new policy ideas through the lens of their values and pre-existing knowledge and practices, often interpreting, adapting, or transforming policy messages as they put them in place'. This approach suggests other sociological and psychological theories of sensemaking such as positionality (Banks, 1996; Kirk and MacDonald, 2001; Rehm and Allison, 2006) and affective events (Niebieszczanski et al., 2016; Weiss and Cropanzano, 1996) can be suitably

layered as complementary lenses to further explore and theorise how school level actors enact policy messages.

6.3. Acceptance and rejection of hyperactive policy messages

This section focuses on the first stage of policy enactments: schools' interpretation of MHWB policy messages, and will explore why and how schools either accept or reject hyperactive policy messages. Analysis of data will again draw on Bernstein's (2000) transmission context as in the previous chapter. Explorations of schools' interpretations of policy messages will consider the extent to which school level stakeholders possess both recognition and realisation rules (Bernstein, 2000), as well as the extent to which hyperactivity moderates the clarity of these rules. The chapter suggests that the extent to which schools possess these rules is ultimately likely to affect the extent to which recontextualisation occurs.

Greenhalgh and Papousti's (2019) interdependencies are also again drawn upon in this section, with strong system interdependencies considered to create clear recognition and realisation rules, and faithful interpretation and recontextualisation; weak interdependencies creating the opposite. The first sub-section presents data suggesting that some of the strongest MHWB policy messages outlined in the previous chapter create clear recognition rules and are supported by schools' moral and ethical willingness to intervene. However, data analysed in the second sub-section propose that pressures from both strong and weak policy messages cause problems for schools in ascertaining realisation rules.

6.3.1. Clear acceptance of messages

Data presented in this section illustrate the ways in which strongly framed and classified messages create clear recognition rules for schools, and how these messages were those that were explicitly accepted by schools. For instance, participants' accounts suggest they were highly motivated and willing to intervene in pupil MHWB. Schools orientated particularly towards the moral and ethical elements of messages. They also relayed clearly defined messages relative to the emergent evidential link between mental health and academic attainment, and this contributed

towards their construction of the role of the school in similar ways to PRC stakeholders. Schools also clearly adopted policy level messages of early intervention and prevention forwarded by policymakers. All three instances of interpretation suggest that strong messages create clear recognition rules for schools.

Interviews with staff at both schools showed a clear acceptance of policy messages which were strengthened by a willingness to intervene. The desire to provide this support was discussed in relation to strong moral and ethical orientations. Support staff were overwhelmingly positive about their role and responsibility within the school system. Both support and teaching staff at Rangers and Holloway conveyed the importance of the role of the school as a key player for provision within the complex supra-system. For instance, Daniel, a key member of support staff at Holloway noted:

*I do believe as a school we're really good [on **MHWB provision**]. I mean I think we have to be for the type of school we're in. I think we have to be, because we would just fail so many of the children if we weren't.*
(Daniel, Emotional Literacy Support Assistant (ELSA), Holloway)

Support staff at Rangers also documented positive outlooks about their roles in taking responsibility for promoting pupil MHWB, for example:

I love doing it and I love having a result. Um, I've had children who have left school, I've had letters from them saying that they wished they'd spoken to somebody sooner, um, and it's a huge ... it's just so gratifying when you feel that you have helped somebody... if our children know that there is some, there are people that will help them and have time to talk to them, that's got to be positive hasn't it?
(Becky, ELSA and Nurture assistant, Rangers)

Accounts presented above suggest schools possessed clear recognition rules for the moral and ethical components ('*I think we have to be [good on **MHWB provision**], because we would just fail so many of the children if we weren't*') of the policy

messages introduced in the previous chapter. Messages about the central role of the school, justified by the evidential link between good mental health and improved academic attainment were also well-transmitted at the PRC-school interface, leading to clear orientation towards, and acceptance of, this evidential connection in school headteachers' accounts at both Holloway and Rangers:

To ensure that the children have a purposeful and, safe environment, to ensure that they make the necessary progress while they're here, but also that, that their health and wellbeing is prioritised because until that is in place and supported the children can't make that progress.

(Marie, Headteacher, Holloway)

On the face of it my primary job is to get children's education as good as it can be for their future life, their careers, their jobs. But underpinning all of that, if we don't get that bit right, the wellbeing, the happiness, the health, and all of that, then that isn't going to happen.

(Rachel, Headteacher, Rangers)

Both Rachel and Marie drew on strong messages developed by PRC stakeholders justified by the link between positive mental health and academic attainment. Rachel discussed how MHWB was an '*underpinning*' for pupils' education. However, where policymakers and many regional level actors applied these ideas by centralising character and behaviour education as a foundation for provision, many staff at both schools instead interpreted these messages as best enacted at the environmental level, therefore orienting towards school collaborators' agendas. This orientation potentially resulted from school collaborators' transmission efforts at the community-school interface, where they plied their professional identity to forward their perspectives and philosophies regarding intervention strategy. Regarding the role of the school, participants possessed the required knowledge regarding the content of the policy messages, as well as what was required from them (Leow, 2011) in their individual and collective professional roles.

Participants likewise commented on the prevalence of mental health conditions in their pupils. Arguably these comments could be read in accordance with an

orientation towards the importance of early intervention and prevention strategies. Victoria, the wellbeing coordinator at Holloway primary, perceived that mental health conditions were becoming '*more prominent*' in the school. Likewise, school staff at Rangers primary also considered the prominence of low self-esteem and confidence across their cohorts of pupils and interpreted this as a justification for intervention. Nicole, a year 5 class teacher, noted:

Because, honestly, if you saw how my class were on a bad day, you would feel miserable in there. And this drains me because they just, you know, it's sad, it's really sad to see.

(Nicole, year 5 class teacher, Rangers)

As well as making more general interpretations of PRC stakeholders' policy messages around the importance of early intervention and prevention, school staff considered the importance of adverse childhood experiences agendas. Staff at Holloway discussed their familiarisation with these agendas in detail. On this topic the headteacher noted:

*They [**pupils**] just seemed to realise what their life was made up of and they either continued on the straight and narrow or they couldn't cope with what life was doing with them.*

(Marie, Headteacher, Holloway)

At Rangers, the stronger language of '*erupting*' was employed by staff, one of which noted that issues that are left to aggravate cause people to '*explode some time in life*'. Another member of support staff expressed how early experiences have '*knock-on effects*', with the head and deputy headteachers at ultimately feeling very concerned about their pupils becoming adults:

We feel by the time they get to year five and six it's erupted and yes, we've done things along, but it's not been enough. Whereas, er, if they could have accessed that sort of maybe a year or two ago, it might not have got to that

(Paula, Deputy Headteacher and Alternative Learning Needs Coordinator (ALNCO), Rangers)

Staff from both schools orientated towards early intervention and agenda policy messages, though the data presented above also suggest that schools' interpretation of these were strengthened due to their direct experience and observation of rising prevalence of MHWB complications in their pupils. Schools' interpretation of strong policy messages can be analysed by considering the strength of interdependencies between PRC and school levels. Indeed, data in this section highlighted that strongly framed and strongly classified messages create clear recognition rules for schools. Recognition rules are particularly clear regarding three key policy messages: the moral and ethical imperative for intervention, the logical role of the school given the emergent evidential link between good mental health and academic attainment, and the importance of early intervention and prevention agendas in effective school-based provision.

As well as possessing clear recognition rules, schools themselves exhibited particularly strong moral and ethical orientations for intervention which manifested in willingness to intervene. Regarding the transmission and interpretation of these key policy messages, strong system interdependencies between PRC and school levels facilitate clear recognition rules. However, realisation rules were perhaps more difficult to obtain for these policies, with Victoria noting '*no one's really sure*' how to respond to rising prevalence.

The following section will theorise schools' possession of realisation rules by interrogating how they negotiate weaker messages. Schools' interpret clearly strongly-framed and strongly-classified messages relating to moral and ethical reasons for intervention the role of the school underpinned by the evidential link between good mental health and academic attainment, as well as comments suggesting their orientation (whether explicit or implicit) towards the importance of early intervention and prevention.

6.3.2. Duality of acceptance and rejection of messages

Where there were instances of clear acceptance of certain policy messages, schools also engaged in complex interpretation processes which led to both acceptance and rejection of the same messages. Where clear recognition rules existed in relation to

messages highlighted in the previous section, the transmission of other key messages created problems for schools in ascertaining the required realisation rules. Schools' inability to access realisation rules was not exclusive to the weakly classified and framed messages relating to intervention strategy and assessment documented in the previous chapter.

Messages regarding the relocation of provision from clinical to school settings created a 'cocktail of pressure' where Rangers were unsure of how to respond. Conceptually confused (Ecclestone, 2012), weak messages regarding intervention strategy had a particularly strong effect at Holloway, who simultaneously endorsed both individual (character and behaviour education) and environmental (healthy settings) approaches. The duality of acceptance and rejection of policymakers' messages also existed regarding provision assessment, further elucidating the complexity of the interpretation process. The key result of these interpretation processes is that schools 'dabble' in and trial various MHWB approaches in search of contextual relevance.

PRC stakeholders justified MHWB intervention need on several factors, one of which was the changing preferences of children and young people for MHWB provision to be located away from solely clinical settings. However, specific pressures resulting from overburdened clinical services had significant effects on staff at Rangers, adding further pressure on schools to respond to this deficit. Staff throughout the hierarchy at the school commented on these pressures, for instance:

*The problem with that [**overburdened clinical services for child MHWB**], is waiting lists, and this is the other thing we're up against. You sort of feel 'that child needs to be seen straight away', but then there's a year's waiting list [...] so, if you haven't got those people trained within school, it's very difficult, and you just feel that your hands are tied. It's worrying you can't deal with that.*
(Alexandra, year 6 class teacher, Rangers)

At the moment I've got a really long list of children, but I haven't got... I make time but it's not quality time. I mean most of them need quality time and it's, ... I don't like it when I've got to rush them.

(Clara, ELSA, Rangers)

I think it's just a big sort of cocktail of pressure from all over really, I think, you know, impossible to manage really. I don't know how the schools keep together.

(Nicole, year 5 class teacher, Rangers)

PRC stakeholders' narratives suggested schools now had an 'obligatory choice' (Bennett et al., 2009; Sianou-Kyrgiou and Tsiplakides, 2009) to intervene. Data in this section support these perceptions with school staff noting '*you just feel that your hands are tied*'. Strong messages documented therefore created a '*cocktail of pressure*' for Rangers especially, and the reality of overburdened clinical services contributed to the conveyance of extra demands on schools. Strongly classified and framed policy messages exhibited a cohesive interdependency (Greenhalgh and Papousti, 2019) between the PRC levels of the supra-system, and their clear message led to the communication of considerable pressure. Heightened expectations and the obligatory choice were however undermined by Rangers' problems with establishing realisation rules, leading to perceptions that '*it's worrying you can't deal with that*', and pressures are '*impossible to manage*'.

An alternative interpretation of this data is that schools possess realisation rules, namely, what they need to do (in promoting pupil MHWB through interventions), however pressures such as time and workload constraints (the '*cocktail of pressure*') prohibit them from achieving this. However, data from both PRC stakeholders in the previous chapter, as well as data from staff at both Holloway and Rangers in the next section, suggest that even if this were the case, their ability to access clear evidence-based approaches for their realisation rules is prevented.

Holloway's interpretation of policy messages about intervention strategy was complex due to interpreting divergent messages transmitted from the PRC level. Policymakers' and school collaborators' agendas created divergent, conceptually conflicting messages, where policymakers generally preferred to focus on narratives of individualising responsibility (Brunila and Rynänen, 2017; Schrecker, 2013), underpinned by foregrounding the importance of character education and pro-social

norms. School collaborators instead centralised the importance of developing healthy environments, before any individual-level focus was justified. During discussions around intervention strategy, staff at Holloway initially gravitated towards individualisation:

We can obviously instil strong morals and teach lessons but it's...they need to see it in practice [at home] all the time and they see it in school, but they're only here six hours a day ... I think quite often ... I mean I'm probably guilty of it when you think they've done something wrong they need to be punished.
(Victoria, Wellbeing coordinator and KS2 class teacher, Holloway)

As well as individualisation (*'installing strong morals'*), behaviourist educational strategies of *'punishing'* pupils were forwarded. However, when reflecting on the application of these messages, the same participant clarified the importance of healthy environment and relationship building, centred on de-stigmatisation and working in opposition to notions of *'fixing'*:

So just being able to explain that, kind of, it's not them [the children]. And I think some people probably forget that it is like, it's not their fault ... and it's just talking, like, saying what you can see rather than trying to fix it [the problem] for them. You just need to let them know you understand.
(Victoria, Wellbeing coordinator and KS2 class teacher, Holloway)

Victoria's accounts suggest there is to some degree a filtering down of policymakers' messages regarding individual-level approaches, in the case of staff at Holloway, by *'instilling strong morals'*. However, school stakeholders were reflexive and self-critical about the employment of these narratives, and in the context of intervention strategy, noted that this was not the right approach, where instead many of the MHWB conditions observed in children were *'not their fault'*. School collaborators' messages centred on organisational change were again transmitted and interpreted much more evidently than policymakers' messages. However, the fact that staff drew from both individual and organisational level narratives and the simultaneous endorsement of antithetical messages seemingly reduplicated the conceptual confusion inherent in PRC stakeholders' accounts.

At Holloway, an additional instance of the staff's complex interpretation of weak policy messages arose during conversations about provision assessment. Staff gravitated toward both acceptance and rejection of the same message. For instance, when asked about inspections, Daniel, an ELSA-trained member of support staff, noted '*the way I look at it [good mental health] is attendance. If they're coming into school, they're happy*'. This quote provides insight into how certain messages ('attendance, attendance, attendance') were transmitted clearly at the PRC-school interface. Here, messages relating to the importance of attendance as profiled previously, even though considered 'weak' messages due to poor framing and conflicting interdependencies in the system, had enough recognition rules for Daniel to interpret in the above way.

However, the ways in which the current inspection framework was employed by Estyn in school inspections was contentious. Staff at Holloway reflected on the school's socio-economic and socio-cultural context, an important dimension of context outlined by Pfadenhauer et al. (2017) and other authors in Chapters 3 and 4 (e.g. Henderson et al., 2005). Staff suggested their frustrations with how they were treated during inspections. As a school who provided MHWB support for many refugees and other vulnerable groups, ensuring there existed the foundations of a safe environment and emotional support was their number one priority:

I think as a nation we've changed now you know there's a lot of the, you know the um, you know, people like from Syria and places like that that are coming in and they come to school with no English. Well how can you judge them on whether they can then read or write in two years' time you know, look at them how they came in with their mental problems from what they've seen in their home life to now they're coming to school with a smile on their face and they're happy to come to school and they feel safe in school ... That doesn't get judged in an inspection you know [...] I'm not one for being a green school and all this with all the, the erm inspectors and that I'm not, you know if the children are happy and the children are coming to school and the children are learning and they know they're in a safe environment and they know if they have an issue whether it be from school or at home and they need somebody they can talk to that to me is just as important [...] Not everything is black and

white, you can't sort of judge one school against another school where one school's ninety percent white Welsh and you know somebody like ourselves who is you know, sixty percent, seventy percent ALN [alternative learning needs] because of the type of cohort we have.

(Daniel, ELSA, Holloway)

Here, Daniel possessed some degree of the recognition rules – what was required of the school by the inspectorate, (*'the way I look at it [good mental health] is attendance. If they're coming into school, they're happy'*) – however these messages were considered ostracising and under-valuing the significant extra pressures the school had, to ensure pupils felt safe and a basic level of wellbeing due to their unique context (*'you can't judge one school against another school... because of the type of cohort we have'*).

Furthermore, whether Daniel and other staff at Holloway possessed the realisation rules, personal and professional convictions regarding the moral and ethical questions that arose from the school's socio-cultural, socio-political and socio-economic context (important contextual domains outlined by Pfadenhauer et al., 2017) were also critical in the interpretation of these messages. These data provide insight into the need for policy messages that are not just well classified and framed, and therefore provide schools with clarity of recognition and realisation rule, but also require *'buy in'* from schools.

Moreover, as Braun and Maguire note (2018, p. 2) *'even if a policy purports to be about straightforwardly 'practical' aspects, such as how a child's school day should look like and what can be done to close the educational achievement gap between rich and poor, these issues are underpinned by values, beliefs and ethical imperatives'*. In the case of Holloway, this was extremely clear and a key reason why these messages were considered less important at the school level (*'I'm not one for being a green school and all this'*). The weakness of the policy message and system interdependency regarding intervention inspection and assessment as presented formerly was perhaps still the overriding factor in Holloway's interpretation process.

For Holloway, messages around intervention assessment were considered ostracising and ill-fitting for their unique socio-cultural, socio-economic and socio-political context (Pfadenhauer et al., 2017). Rangers found that messages relocating responsibility for MHWB with schools created a *'cocktail of pressure'* where these pressures were *'impossible to manage'*, where it was *'worrying you can't deal with that'*. Both schools struggled to acquire realisation rules for strategy messages: they simultaneously endorsed and rejected messages where the content was conceptually confused (Ecclestone, 2012) and conflicted. The weakness of these messages filtered down to the school level and shows the influence of wellbeing as a boundary object (Star, 2010; Star and Griesemer, 1989) over the development, transmission and enactment of policy messages containing these concepts.

6.4. Dabbling and trialling: searching for contextual relevance

Staff at Holloway were very clear about how intervention assessment policy messages were not relevant for their specific socio-economic, socio-political and socio-geographic context (considered as important by Pfadenhauer et al., 2017), and their rejection of these messages was evident. As a result, the school preferred to trial various approaches. Crucially, this was also consequent of not being able to obtain the realisation rules due to policy hyperactivity and the oversaturated intervention market. Reflecting again on Bernstein's (2000) transmission context, the weak classification and framing of rejected messages provided schools agency to select approaches. Holloway in particular exercised control over which approaches they would foreground in their daily practice. Staff in management and senior leadership positions in particular were aware of the importance of contextual-relevance in the selection of suitable approaches, for instance:

We don't want to keep doing things because they've been recommended, or they've worked somewhere else, 'cause it doesn't mean they're necessarily going to work here.

(Victoria, Wellbeing coordinator and KS2 class teacher, Holloway)

When you're thrown lots of things from external agencies, you just have to look at each one and decide whether it fits in with the path that your school is

on, and you have to be afraid to say no to a few things as well. 'Cause if you bombard the school with too much and don't pace it correctly, things will not work, so we've only implemented what we feel is worthwhile.

(Marie, Headteacher, Holloway)

Searching for contextual-relevance in interventions was a key element of schools' enactment of policy messages, and this meant they had to 'say no to a few things as well'. Holloway were acutely aware of the dangers of being 'bombarded' by MHWB interventions at the community-school interface, where policy messages were transmitted, noting how both timing of implementation and setting were imperative contexts.

However, although Holloway were aware of the importance of context in intervention selection, they reported variable success in the interventions they had implemented. Dana, one of the PRC stakeholders whose account was presented in the previous chapter, noted how she had observed schools 'dabbling' in various myriad interventions, and this was a process that was apparent at the school level, suggesting congruence with Weare (2015, e7), who noted 'changes imposed from without tend to be skin deep, with schools cynically and exhaustedly dropping the old initiative in favour of the next when fashions and government policies change'.

A specific example of this was their use of the PATHS survey for identifying children for selective intervention. Victoria, wellbeing coordinator and Key Stage 2 class teacher, discussed the intervention's contextual relevance deficiency, and the school's thought process regarding why this approach to pupil identification was not right for them:

We started looking at it [MHWB] specifically when we did the PATHS survey, which was two years ago. However, we didn't find for our school it particularly worked, um, and it was quite an expensive tool for a kind of one-off assessment for something we could probably do more tailor-made for our school.

(Victoria, Wellbeing coordinator and KS2 class teacher, Holloway)

As well as the deterring effects of high cost, when asked why she thought PATHS intervention did not work for their school, Victoria noted:

I'm not sure how many of our children accessed it truthfully because of maybe the language and probably some of the ability levels and what it brought to us was a lot of data ... but it was ... there wasn't any way forward to kind of, to help. Obviously, you can work from it, but it was a lot of money ... or to do a lot of work where we can do that ourselves. And we know about the children, so I, I actually did a bit of research ... used the Sterling scale, which is just a basic general wellbeing measure, it's not specifically about school. So, I just used that and I'm thinking of kind of trialling that ... for September and trialling that at least with maybe some of the older children.

(Victoria, Wellbeing coordinator and KS2 class teacher, Holloway)

For Holloway, as a school with 44 different languages spoken, as well as a high proportion of ALN diagnoses, the format and language of the PATHS survey was considered ill-fitting for their context. Considered as purely an epidemiological tool for highlighting children for intervention, this approach did not provide staff at Holloway with enough practical guidance for subsequent interventions. Victoria's trialling of her own approaches as wellbeing coordinator, in response to this perception of poor contextual fit, can be interpreted as a direct consequence of the hyperactivity of policy messages which created an oversaturated intervention market, where schools felt 'bombarded' by myriad providers. Furthermore, Marie, the headteacher at Holloway, discussed how the school had moved away from paid providers, towards a self-sufficient provision programme.

At Rangers, analogous trialling processes occurred for similar reasons. Rachel, the headteacher at Rangers, provided additional reasons for their recontextualisation processes of dabbling and trialling. The perceived lack of support (and therefore realisation rules) created frustration in narratives of staff:

We don't really know what's going on, um, so we feel a bit out of the loop, and yet we're still supposed to be trying things out and everything.

(Rachel, Headteacher, Rangers)

This quote provides insight into Rachel's frustrations with the current guidance ('we don't really know what's going on'), and further elucidated the impossible space that schools faced based on the demands of policymakers. This was another instance of where broad policies, originally founded and justified by strongly classified and framed messages, were not supported by clear recognition or realisation rules for schools, and were potentially undermined by weak, conceptually confused, messages. Instead, as part of their contextually driven approach, Rangers selected different programmes each term or year in response to perceived need across different cohort groups:

We don't always run Nurture, we don't always run ELSA, it depends on you know, if we have a particular cohort that's got, um, things that would be appropriate for Nurture, especially the younger ones, we go for that. If it's other things it might be ELSA.

(Rachel, Headteacher, Rangers)

Schools seemingly 'dabble' due to their interpretations of having an obligatory choice to intervene in pupil MHWB ('we're still supposed to be trying things out'), but not having possession of required realisation rules to respond to various policy messages. This process is considered a response to the lack of context-contingency perceived in available approaches marketed to schools by myriad intervention providers, leading to a hyperactive climate. Though staff at Holloway were more explicit about their frustrations with existing messages for this reason, both schools engaged in dabbling and trialling processes, suggesting discontentment towards the current messages due to problems with contextual relevance.

It is contended that both strongly and weakly classified and framed messages of pressure from supra-system actors from the PRC levels cause schools problems in possessing of the required rules for authentic enactment. Though to a degree stronger messages create clear recognition rules (what is required of schools), to provide school-based MHWB provision, weakly-framed and weakly-classified messages, where stakeholders produce poor clarity of message categorised by discontinuity within the interdependencies of the hierarchies within the supra-system, lead to schools not having either the required recognition rules or realisation rules.

Using Leow's (2011) reading of the recognition rules of the transmission context model, for effective interpretation of PRC stakeholders' messages, schools required both knowledge about the message and what was required for effective enactment. Both strong and weaker messages transmitted at the PRC-school interface created significant confusion in school level interpretations. Schools did not possess the recognition rules for messages related to intervention strategy or assessment.

From participants' accounts, it is contended that schools' inability to access realisation rules for key messages at least partially resulted PRC stakeholders' unawareness of what schools require on the '*front line*' to effectively intervene in the MHWB of pupils. It is further suggested that the lack of recognition and realisation rules stemmed from wellbeing functioning as a 'boundary object' (Star, 2010; Star and Griesemer, 1989), as noted in the previous chapter, where terms such as 'wellbeing' having commonality of reference but with interpretative flexibility in understanding. In the previous chapter this created divergence and tension. The following section focuses on how schools cope with the impossible space through their recontextualisation practices, where often strong recognition rules are accompanied and undermined by a lack of realisation rules.

6.5. Recontextualisation of policy messages

This section presents three main recontextualisation (Bernstein, 2000) processes identified at both schools, elucidating how they implemented various selective and universal MHWB programmes. Schools made use of the unique positionality of key members of support staff and used these factors to improve the contextual fit of their intervention practices. Schools also de-formalised their emotional spaces in order to centralise the development and sustainability of positive staff-pupil relationships. Furthermore, schools resisted the messages of '*fixing*' individuals prevalent in policymakers' and some regional stakeholders narratives in Chapter 5, in favour of creating de-stigmatised spaces where trust and healthy expectations were key. All processes were affected by schools' interpretation of the messages developed at the PRC level.

Singh et al. (2013, p. 465) describe recontextualisation as ‘the relational processes of selecting and moving knowledge from one context to another, as well as ... the distinctive re-organisation of knowledge as an instructional and regulative or moral discourse’. This is where, as Ball et al. (2011a, p. 3) note, ‘the translation of texts into action and the abstractions of policy ideas into contextualised practices’ occurs. Bernstein (2000) fashioned these ideas within his consideration of the official and pedagogic ‘fields’ of discourse: the ‘official’ field of discourse being the ‘abstractions of policy ideas’ and ‘pedagogic’ field the contextualised practices of schools. These contextualised practices are influenced by schools’ discourses, operations, narratives and perspectives.

6.5.1. Utilising the unique positionality of key staff

Schools recontextualised policy messages by utilising the unique positionality of key support staff throughout the school. The experiential knowledge of these staff was arguably used to maximise the potential for positive staff-pupil relationships focused on empathy and trust, particularly within the emotional spaces of MHWB interventions. In both schools, there existed certain members of staff within the school system that were considered central to the effective provision of MHWB support. These were largely those who had applied, been assigned or had voluntarily taken up key positions within the school, and both self-identified and were identified by their colleagues as central to emotional work. Two key members of staff featured prominently during this section of analysis: Clara, an ELSA-trained support staff member at Rangers, and Daniel, who undertook the same role at Holloway.

This section of analysis draws on the concept of positionality to explore how the ‘goals, knowledge, beliefs, strategies and other normative frames of reference’ (Banks, 1996, cited in Rehm and Allison, 2006, p. 261) of school staff influenced intervention practices. To deepen understanding of how individual-level sensemaking processes affect schools’ self-organising, recontextualising properties, this thesis also considers affective events theory (AET) (Weiss and Cropanzano, 1996).

Applied to school level processes, AET is used to identify how the affective experiences of staff translate into affective behaviours, and how these actors ultimately 'become the intervention' (Niebieszcanski et al., 2016). Though this thesis is largely interested in systems-level processes, individual-level lenses such as positionality (Banks, 1996; Kirk and MacDonald, 2001; Rehm and Allison, 2006) and AET are considered relevant to theorise why schools might recontextualise policy messages, providing a further element to analysing these processes beyond thinking solely about the extent to which schools possess the required recognition and realisation rules within the transmission context framework.

At Holloway, Daniel's positionality was an important influence in the implementation of MHWB interventions. He noted that *'I've suffered with anxiety and I wouldn't speak about it, and I just tried to battle my way through until it got to a point where I just couldn't'*. Daniel had been in his role as an emotional literacy support assistant (ELSA) for several years when interviewed and was central to many of the MHWB interventions implemented by the school. Arguably, Daniel's own experience suffering from anxiety influenced his prioritisation of MHWB approaches. Daniel reflected on the unique advantages of being a member of support, rather than teaching, staff, and the potential moderating effects this would have on his ability to effectively deliver MHWB programmes. His perceptions were that pupils viewed him differently compared with a member of teaching staff:

I think they saw the teachers as the teachers but because I do all these other outside activities with them, they see me slightly differently.

(Daniel, ELSA, Holloway)

Likewise, the unique advantages of intervention staff having non-teaching status was considered by Victoria:

I also think if you're dealing with [MHWB] in a classroom situation you lose the patience for it. It has to be somebody removed that hasn't had to put up with all the little stuff they've done.

(Victoria, Wellbeing coordinator and KS2 class teacher, Holloway)

Similarly, Clara, an ELSA-trained support staff member at Rangers, considered her affective events as an important catalyst for decisions to train in ELSA and other programmes:

I didn't have the best when I was a little girl. My mum and dad split up, so I would've liked a me when I was in primary school. Maybe it would have made the rest of my years in school, you know comprehensive and that a little bit easier because I think I did struggle. So, I feel like I want to help children as much as I can, you know, so they don't hopefully feel like I felt ... when I'm talking to kids as well it's based on my own personal things. I can relate.

(Clara, ELSA, Rangers)

Interestingly, other staff at both schools considered Clara and Daniel's unique position as key intervention agents and were aware of their suitability for the role of undertaking emotional labour within intervention spaces. For instance, on Clara:

One of the LSAs is very, very, very good herself ... but she's sort of ... I think can put herself in the place of these children, because she had sort of some issues when she was younger as well. So, I think she's got a good understanding of what they're going through, because of perhaps, you know, her background ... if you haven't had any experience of perhaps anybody in your family as well, um, having had any issues like that, or haven't had problems with that. I think then it's harder when you have children coming to you with these, sort of mental health problems to actually deal with it and know what to say.

(Alexandra, year 6 class teacher, Rangers)

Clara was considered a key MHWB intervention agent as she was able to 'put herself in the place of these children, because she had sort of some issues when she was younger as well'. Other staff who had not experienced such affective events previously were viewed as less able to react effectively ('I think it's harder when you have children coming to you with these, sort of mental health problems to actually deal with it and know what to say').

Likewise, about Daniel:

[Daniel] and [Zara] are the only two trained [in ELSA] but they're in class so they kind of fit their ELSA in before and after school, um, in assembly times. They do that as well sometimes in their own time. That's a lot of dedication from them.

(Victoria, Wellbeing coordinator and KS2 class teacher, Holloway)

Other members of ELSA-trained support staff considered their positionality and experience were the 'best resource':

I feel a lot of time and money is spent on new programmes whereas actually we are probably the best resource. We're all trained. We're all a big family and a big team.

(Becky, ELSA, Rangers)

Clara's unique positionality and affective experiences were considered by other staff. Similarly, Daniel was identified by staff at Holloway due to his 'dedication'. Key staff both self-identified and were identified by the staff around them as key intervention agents for effective MHWB provision, with colleagues of Clara noting she 'can put herself in the place of these children'. Positionality and affective events were critical contributors to why these specific agents were identified by themselves and colleagues. Pupil-level data presented in the following chapter are analysed using the lenses of Daniel and Clara's positionality to explore the importance of these recontextualisation processes on pupils' experiences of MHWB interventions.

6.5.2. De-formalising emotional spaces for better staff-pupil relationships

Schools' interpretation of policy messages resulted in a clear orientation towards school collaborators' work at the community-school level interface. As a result, both schools as a result engaged in de-formalising processes with the intention of foregrounding positive staff-pupil relationships within emotional spaces. This subsection explores the differing ways in which Holloway and Rangers engaged in

these processes. The key element of both practices was to rethink intervention spaces, whether from a physical or conceptual perspective.

At Holloway, de-formalised spaces were created by flattening the school hierarchy: whole-school investment from SLT members through to support staff where the headteacher was heavily invested not just in the development of interventions, but the enacting and engagement. At Rangers, physical environments were modified, combined with a culture of providing pupils with the agency to decide how and when they engaged with these emotional spaces. In both cases, trust and empathy guided the cultivation of healthy and strong staff-pupil relationships. Both schools' practices were designed to locate emotional spaces as conceptually and physically different from academic spaces, to develop these distinct relationships. As Victoria, the wellbeing coordinator at Holloway mentioned when deliberating messages relating to intervention strategy, *'you just need to let them know you understand'*.

Holloway engaged in de-formalisation practices in many of their MHWB approaches, however the development and implementation of one intervention, the 'Helping Hand', best illustrated these practices. The Helping Hand was a universal intervention where all pupils were asked to nominate five members of staff across the school who they felt comfortable talking to for emotional support. Any member of staff could be nominated in this process, including the headteacher and senior leadership team. The headteacher explained how positive staff-pupil relationships were centralised and were the key outcome of the Helping Hand intervention:

Relationships are at the basis of everything. I firmly believe if you haven't got those relationships between you as a staff and a team, it's not going to translate down to the children but that's one of the things we do very well here, and that's across, my staff. My ancillary staff in the kitchen have got good relationships with the children. My TA's, my teachers, my admin staff offer support to children, so we're very lucky that the children have got a wide range of familiar adults who can make them feel secure ... It has to come from the leadership. I firmly believe that children's wellbeing is a priority.
(Marie, Headteacher, Holloway)

Most staff considered the 'Helping Hand' as a useful intervention tool, and this was primarily because of the whole-school investment in the programme, with Marie noting the prioritisation of MHWB interventions '*has to come from the leadership*'. 'Helping Hand' was described by the headteacher as a '*safety net*' for when pupils did not want to talk with their class teacher. In many cases, the headteacher was nominated as one of the five adults, and this seemed to help drive the intervention forward as a valuable MHWB programme. Non-management staff were very aware of the importance of SLT investment and noted that Helping Hand had '*top-to-bottom*' investment across the school hierarchy. Furthermore, SLT were aware that teaching staff might not always be the best or most appropriate individuals for pupils to talk to on an emotional level.

Staff perceived these programmes as working effectively due to the trust and relationships developed with pupils by flattening the school hierarchy in emotional spaces ('*relationships are at the basis of everything*'). Ensuring that the head teacher was considered as somebody who could undertake an emotional role and was not somebody solely associated with behavioural discipline in educational spheres was a key element of this intervention. Daniel reflected on the success of the programme in terms of the perceived ease in which pupils have in selecting five adults:

I can't think of ever doing one where the child has sat and said I can't think of five people which I think is also another positive message that they can quickly write down five people without really thinking about it. So, I think that shows that there is that trust and awareness within the children that they can almost instantly just write five names without being given hints ... I think we're quite, um, it's an open-door policy because you know you don't want to see the head as just somebody you go to because you've been naughty ... to know that she's there if you want something to talk about and she'll make them a hot chocolate and they'll sit, and they'll just chat you know.

(Daniel, ELSA, Holloway)

Above, key support staff and their colleagues highlighted the importance of non-teaching staff being involved in the implementation of interventions due to their unique positionality, and this was something Daniel also thought important regarding

the involvement of SLT staff in the Helping Hand intervention, noting pupils '*don't want to see the head as just somebody you go to because you've been naughty*'. De-formalisation therefore was considered a process applying to the entire hierarchy, though this was specific only to Holloway.

Staff at Rangers also looked to de-formalise their emotional spaces in various ways, though they focused less on the full hierarchy of the school structure. Rachel, the headteacher at Rangers, discussed how the school adopted '*ad hoc, informal*' approaches alongside the formalised approaches of ELSA and Nurture interventions. Informal selective programmes were first and foremost based around drawing less attention to the fact that pupils were taken out of class. One of the main narratives of informality was how staff across both schools talk of going to '*have a chat*' with pupils, and this discourse was heavily embedded and normalised throughout staff accounts from both Rangers and Holloway, from SLT members to support staff, suggesting this was something embedded at a system-level.

One specific intervention practice that showcased these processes was the development of the 'Cwtch room'. The Cwtch room was a break-out area separate from the classroom spaces and was decorated to look like a living room with sofas, a fish-tank and other home '*comforts*'. As Paula, the deputy headteacher and alternative learning needs coordinator, noted:

*We've set up the Cwtch as well, when I first came it was just, a SENCO **[special educational needs coordinator]** room, the old sort almost old-fashioned intervention SENCO room where all the children would be pulled out, so what we did, we stripped it back, and made it into the Cwtch which is more of a nurture room for any of the children to access. So, not just children who are accessing nurture and ELSA but any of the other children that might need that little bit of time out ... so it was making sure that we did have a point of where the children went, but somewhere that was comfortable. So, we did strip it all back and it, it was made more homely in there, and then, even the interventions that run, also run in there. So, the children aren't feeling they're in another classroom environment learning.*

(Paula, Deputy Headteacher and Alternative Learning Needs Coordinator, Rangers)

Paula recounted how the school had changed in terms of the physical environment of wellbeing spaces. For instance, where the school used to have an '*old-fashioned SENCO intervention room where the children would be pulled out*', the room was now a more inclusive area, made up to look '*homely*' and comfortable. This room was reframed as a space for all children to access, rather than somewhere associated with where children were '*pulled out*' of the classroom. Instead, children who needed '*that little bit of time out*' were encouraged to use the room. Several staff at Rangers commented how it was crucial that intervention spaces were kept separate, both conceptually and environmentally, from classrooms. Classrooms were considered associated with academic learning and therefore considered the wrong setting for MHWB interventions. One member of staff for instance commented:

Steve: *So, pupils respond well to that [Cwtch room]?*

Deb: *They do, they do and I think with drawing them into an environment like the Cwtch, where you've got the little sofa and the rug and the fish tank, and the table, it's a bit more like being at home, it's almost like a softer, it's not a classroom environment, where they can come in, give them a drink of water, you know, a couple of tissues and say hi, you know, do you want to tell me, you know, you don't feel pressured, if you don't want to tell me what's going on, but if you'd like to, I'm here, you know, for you, you know.*

Steve: *Yeah.*

Deb: *Um we're a big family in you know, Rangers, you know, you've got your family at home, but we're your school family and we all look after and support each other you know, and the Cwtch is a fantastic resource for that, yeah, it is.*

(Deb, Year 5 Learning Support Assistant (LSA), Rangers)

Paula considered the key differences between '*pulling out a child*' into an '*old-fashioned SENCO room*' and inviting pupils to '*have a chat*' at the Cwtch room. These reflections can be analysed considering specific policy messages developed and transmitted by PRC stakeholders. For instance, the former approach suggests inherent power inequities between pupil and staff member and are more likely to be underpinned by character and behaviour educational strategies. Instead, by foregrounding the latter approach, this was more suggestive of an orientation towards, and one key element of, a healthy settings approach centralised by school collaborators ('*we're a big family... we're your school family and we all look after and support each other*'). This is further evidence that collaborators' transmission work crystallises schools' agendas, and they use their positionality and professional identities at the community-school interface to convey recognition and realisation rules specific to their agendas, which provides clarity amongst otherwise weak messages.

6.5.3. Resisting the messages of fixing individuals

The final key recontextualisation practice identified from the data analysis were the de-stigmatising practices resultant from schools' resistance of the messages of fixing individuals, underpinned by character and behaviour education agendas foregrounded by policymakers and regional stakeholders. Instead, one of the core components of developing healthy environments was the ways in which both schools looked to cultivate non-stigmatising expectations of their pupils within emotional spaces. For Holloway, this was through staff expressing '*I don't expect you to be perfect*' (Daniel, ELSA-trained member of staff); at Rangers, this was through ensuring pupils knew staff were not placing blame onto them for their behavioural challenges. Both schools facilitated climates of trustworthiness and empathy.

Reflecting on Holloway's rejection of policy messages regarding assessment, these data provide insight into why they recontextualised messages in this way. It is contended that staff felt absolute loyalty towards their pupils due to the socio-political, socio-economic context (two of Pfadenhauer et al.'s (2017) contextual domains) considered in their responses to these policy messages. It is suggested

that this experience led to the school communicating very different expectations of their pupils, compared to those of policymakers. For instance:

When I was in Year 4, just kind of used to tell the children, obviously we want them to achieve academically as well as they can, but I want them to be nice humans and that's kind of always what I say to them. I just need you to be nice human beings, like, I understand they don't, not all going to be friends, but you still need to be tolerant and respectful, just kind of those morals.

(Victoria, Wellbeing coordinator and KS2 class teacher, Holloway)

The implementation of the 'ELSA' programme was one key example of the de-stigmatising recontextualisation process where staff want their pupils first and foremost to be '*nice human beings*'. ELSA was one of the most widely discussed programmes by both staff and pupils at Holloway and had been implemented by staff for approximately one year. ELSA was delivered as a whole-school programme across all year groups within the school. Two specialist staff were ELSA trained, one of whom ran the group-based element; the other focused on one-to-one provision. The headteacher, Marie, noted the programme had had a '*positive impact on the children*'. Many of the children referred to the ELSA programme were considered '*children who suffer with self-esteem*'.

Daniel, the one-to-one ELSA specialist, discussed the school's, and his, emphasis on relationship and trust development. He noted that he believed one-to-one provision to be better for older children who were '*more reluctant to open up in a group*', due to the perceived embarrassment of health problems within peer groups. When asked whether mental, emotional or learning difficulties are stigmatised within primary school peer groups, he notes that '*they just get embarrassed at talking about their own feelings in front of their friends and other children in the class*', stating that '*we find they speak much more freely when it's just me and them*'.

For Daniel, ELSA was about building trust with pupils, determining what pupils' difficulties or problems are, and providing solutions. From these accounts, ELSA staff at Holloway foregrounded relationship building within the initial stages of development, and this approach, where trust and relationality were established, and

this was true for both group and one-to-one based elements. Daniel's sensitivity around pupils' embarrassment of discussing their mental and emotional health with teachers and peers affected how he provided support for them during ELSA sessions:

When I do my ELSA, we do talk a lot about, you know listen I don't expect you to be perfect, you know there's going to be days when things don't go right, there's going to be days when you don't feel as good as other days you know but who do you go and talk to you know, I'm here ... Again, we still don't go onto there is a mental health problem [...] What we do in ELSA is we just try and find out a bit more about you and the things you like and what makes you happy and how we can help you relax in school and things like that
(Daniel, ELSA, Holloway)

As well as foregrounding trust and relationship building, a key element of ELSA implementation was the importance of having non-judgemental expectations of pupils. Daniel's discourse around not expecting pupils participating in ELSA not to be perfect was employed in divergence to policymakers and regional stakeholders' narratives of '*fixing*' pupils based on individualisation of responsibility. Responsibility for being a perfect individual or the 'ideal learner' was not centred on pupils. This focus was one of Brown and Carr's (2019) critiques of central UK Government approaches to school-based MHWB. Holloway's destigmatising practices were ideologically built on the foundations of their unique context, as well as the ethos of centralising relationships discussed by various staff.

Furthermore, it is claimed that these practices also filtered down to, or were affected by, approaches by the school, from SLT to support staff, regarding approaches to behaviour. This language around behaviour, which as noted in policymakers' and regional participants' narratives, was intertwined with mental health, character education and the individualisation of responsibility by certain policymakers, was explicitly rejected by Marie, where the school's utilisation of de-stigmatising discourses such as '*the wobble*' acted as antithetical to the notions of '*fixing*' individuals. For example:

We've got a very open culture here. We've developed a term called ... I don't know if other staff have mentioned this this morning, called 'the wobble'. So, if children ... if something goes wrong for a child, we call it 'they've had a wobble'. We don't say, 'you've done something wrong' or 'there's something that you need to fix'. It's just that 'you've had a wobble'.

(Marie, Headteacher, Holloway).

Moreover, staff at Rangers perceived significant difficulties in many of their pupils regarding an inability to communicate poor wellbeing, and many discussions, as presented previous, were had across the staff at the school regarding the 'eruption' of mental health difficulties, particularly in the older children within the school. As Nicole, a year 5 class teacher, noted:

I think there's stigma around mental health, so I think it might be a bit of a grey area when talking to children about it, because they don't want, they don't want to tell people that you can be really, really sad for no reason ... A lot of them don't want people to know if they're a bit sad about something
(Nicole, year 5 class teacher, Rangers)

Staff explicitly communicated to pupils that they were not making connections between their behaviour and the need to 'fix' it, and were keen to clarify that they were not blaming pupils for poor behaviour ('lots of things are not their fault'), particularly in emotional spaces:

I like to think that I could make a difference to some of the children, you know, and just make them, make some of them think, understand that it's not such a dark place all the time ... and that lots of things are not their fault, you know?
(Clara, ELSA, Rangers)

Similarly, to staff at Holloway, de-stigmatising practices were enacted at Rangers by key support staff in emotional spaces, to build trust and understanding. Again, pupils were given more agency to initiate conversations around wellbeing and the school also foregrounded an 'open culture', similarly to Marie at Holloway. Paula, the deputy headteacher and ALNCO, noted:

You're making sure you're there as a role model I suppose, for the children to ... to gain their trust, to make sure that they are able to come and see you, if they want to and they know where you are and where to find you.

(Paula, Deputy Headteacher and ALNCO, Rangers)

The use of the Cwtch room as a separate emotional space was supported by the school's use of the language of 'going to have a chat', used primarily as a tool to de-stigmatise the process of pupils accessing MHWB support in emotional spaces. The use of a 'time out' signal was also embedded into practice, and pupils could use this at any time to take time away from the classroom:

We say to them 'just make the time out sign'. Making the T sign. If they do that to you can have a chat with them and take them out of the classroom, in all classes.

(Becky, ELSA, Rangers)

However, the extent to which Rangers resisted the messages of 'fixing' individuals was more variable compared with Holloway. Agendas of character and behaviour education were more prominent, not just in the sensemaking processes of interpreting and negotiating policy messages, but also in the ways in which these approaches were utilised in the identification of children for selective interventions. For instance, during discussions regarding how pupils were identified for these programmes, the 'Good to be Green' intervention was raised by the head teacher. This intervention was less a MHWB approach, and more of a daily behavioural intervention used for academic purposes. The school used a traffic-light system to categorise pupils based on their behaviour:

*On Friday those who don't [**have Green status**] ... the Key Stage 2 leader would take all those who are not on Green, have a chat with them about why. So, it's another bit of counselling I suppose, but also saying we're keeping an eye on you ... this is another way of identifying children.*

(Rachel, Headteacher, Rangers)

Likewise, when discussing other approaches developed by the school, including the 'Mile a Day' intervention and the use of 'wellbeing targets', the school employed the use of behaviourist educational strategies which seemingly orientated more towards policy messages around assessment that were rejected by Holloway. Behaviourist strategies, such as the use of a target and reward system traditionally used in the academic domains of the classroom, were applied to MHWB interventions, creating a seeming discord between the intervention practices of Rangers in comparison to Holloway. For instance:

We have wellbeing targets, so every week we'll set them a little target of, you know, of just offer somebody help or try to make somebody smile ... I know the target last week was to, to do something that makes you happy. And none of them did it, the last 2 weeks they'd all done it. I thought it was strange that none of them had done this one, so we rolled it over to this week and it's still not ... they're finding it harder to think of something to make themselves happy. But hopefully, Friday, last thing of the day, we'll have you know [achieved the targets]. I'll let them choose a song and they can just stand up and dance and sing for the end of the day kind of thing. So, they can choose the song, and that's their reward if they all get the target.

(Nicole, year 5 class teacher, Rangers)

Three main recontextualisation processes resulted from schools' enactment of MHWB policy messages. Schools operationalise key staff to undertake responsibility for emotional work, and these agents both self-identify and are identified by their colleagues. Schools de-formalised emotional spaces to develop positive staff-pupil relationships in these spaces. Emotional spaces are considered in both conceptual and physical terms: at Holloway, de-formalised spaces were more conceptual, with the flattening of hierarchies. At Rangers, specifically demarcated spaces such as the Cwtch room were re-imagined developing these relationships. In both instances, pupils were given more agency to take control over how they engaged with these spaces.

Data provided insight into how schools resisted policymakers' messages of character and behaviour education, where the individualisation of responsibility and notions of

'fixing' individuals were inherent in narratives. Instead, they again orientated towards collaborators' preferences for organisational-level responsibility and change. To achieve this, they communicated clearly with pupils that blame and responsibility was not applied in MHWB contexts. School staff from both schools suggested that there existed a duality of acceptance and rejection of messages relating to strategy and assessment.

Reflecting on the above data, perceptions of staff at both Holloway and Rangers on the potential role of selective interventions to stigmatise children were clear, showing the relevance of the concerns of various authors in relation to school-based MHWB provision (Gronholm et al., 2018; Lupien et al., 2013; Rapee et al., 2006; Weems et al., 2015; Werner-Seidler et al., 2017). Therefore, school collaborators' messages from the previous chapter, orienting towards the importance of healthy expectations and environments instead of an individualistic, behavioural focus, were feasibly more powerful when considering schools' recontextualisation processes, with the exception of the 'Mile a Day' intervention at Rangers.

6.6. Conclusion

Data presented were used to answer the following question:

How do school staff enact policy messages and how do these processes affect the implementation of MHWB interventions in schools?

Reflecting on the first inquiry area, the context of the outer setting of the educational supra-system affected the inner setting (Damschroder et al., 2009) in several ways. The chapter theorised how schools 'cope' with policy hyperactivity using the analytical lens of policy enactments (Ball et al., 2011; Braun et al., 2011), focusing on the interpretation and recontextualisation of the policy messages developed and transmitted at the policy, regional and community levels of the educational supra-system case study. For strongly classified policy messages, schools had clear recognition rules around the content and clarity of policy messages. These messages were developed with cohesive inter-systemic interdependencies (Greenhalgh and Papousti, 2019). Additionally, schools' sensemaking processes,

categorised by their moral and ethical orientations, contributed toward clear interpretation.

The second area of inquiry focused on schools' sensemaking processes (Greenhalgh and Papousti, 2019), with particular attention to how staff's professional, organisational, cultural and individual mindsets, norms, interests and affiliations (Damschroder et al., 2009) affected the enactment process. Where schools did not have recognition rules, they engaged in complex interpretation processes. These processes were overwhelmingly required where developed and transmitted messages were weaker and had less cohesive interdependencies between the systemic levels. Interpretation processes were considered schools' attempts to make sense of messages in order to find the realisation rules, or how to effectively respond to demands from the PRC level. Inter-school variances were evident at the interpretation phase and these variances highlighted the importance of school context in this process.

The consequences of schools' interpretation processes are that they frequently '*dabble*' and trial myriad MHWB interventions. Schools have obligatory choice (Bennett et al., 2009; Sianou-Kyrgiou and Tsiplakides, 2009) but to intervene, however they do not have the required realisation rules. These trialling processes are considered a search for contextual relevance. Three main recontextualisation processes are undertaken as a result of interpretation of messages, and these were largely resultant of schools' orientations towards the healthy settings approaches of school collaborators as outlined in the community-school transmission process.

Considering the self-organisation of school systems (Greenhalgh and Papousti, 2019), and particularly the third area of inquiry – how schools mobilise their resources, for example rules, norms, roles and material resources (Damschroder et al., 2009) - provides insight into how schools make sense and self-organise in response to policy messages. Ultimately, considering all three recontextualisation processes, for both schools it was important that emotional spaces had different environments, rules, relationships and expectations compared with academic spaces.

It was in these approaches that clear distinctions arose between official and pedagogic fields of discourse (Bernstein, 2000) relating to MHWB interventions. Intra-school differences were also clear in regard to Rangers, who perhaps had more difficulty interpreting the hyperactive policy messages relating to intervention strategy, using arguably conflicting messages differentially focused on individual, behaviour change using behavioural educational strategies, and school collaborators' transmitted messages which cultivated an environment of de-stigmatisation.

The first data chapter established the origin of MHWB policy messages, how they are developed and transmitted in by stakeholders in the outer setting (Damschroder et al., 2009) of the supra-system. This chapter subsequently explored how the development and transmission of messages affected schools' enactment and intervention practices at the inner setting (Damschroder et al., 2009), focusing on the context of both outer and inner systems, their interdependencies, sensemaking and self-organising properties (Greenhalgh and Papousti, 2019).

What is still not known is how these processes and contexts affect how pupils experience the interventions implemented by schools featured in this chapter. To establish the potential importance of developed and transmitted policy messages on pupils' experiences is a key gap in the extant literature, and the following chapter will explore how schools' intervention practices affect how pupils experience these, focusing on systems-level leverage points and barriers to effectiveness and sustainability.

Chapter 7: Liminal emotional spaces: Pupils' experiences of schools' MHWB interventions

7.1. Introduction

The previous chapter explored how schools 'cope' with policy hyperactivity using the analytical lens of policy enactments (Ball et al., 2011; Braun et al., 2011), focused on the interpretation and recontextualisation of the policy messages developed and transmitted at the policy, regional and community levels of the educational supra-system case study. For the strongly classified and framed messages explored in the previous chapter, schools had clear recognition rules around the content and clarity of policy messages. These messages were developed with cohesive inter-systemic interdependencies (Greenhalgh and Papousti, 2019).

Where schools did not have recognition rules, they engaged in complex interpretation processes. These processes were overwhelmingly required where developed and transmitted messages were weaker and had less cohesive interdependencies between the systemic levels. The consequences of schools' interpretation processes are that they frequently 'dabble' and trial myriad MHWB interventions. These trialling processes are considered a search for contextual relevance. Three main recontextualisation processes were enacted as a result of this search for contextual relevance. At both schools it was important that emotional spaces had different environments, rules, relationships and expectations. It was in these approaches that clear distinctions arose between official and pedagogic fields of discourse (Bernstein, 2000) relating to MHWB interventions.

This chapter subsequently explores pupils' experiences of these intervention practices and attends to the following research question:

How do pupils experience the practices of universal and selective school-based MHWB interventions in light of schools' recontextualisation processes?

This chapter explores the effectiveness of Rangers' and Holloway's recontextualised intervention practices as outlined in the previous chapter, from the perspective of Key Stage 2 (KS2) pupils at both schools. It examines pupils' experiences of the practices of various interventions that were developed as part of schools' recontextualisation of MHWB policy messages. As noted previously, there is a dearth of literature focused on pupils' experiences of and engagement in school-based MHWB, with the exception of studies such as McCabe et al. (2017). With this in mind, the chapter seeks to establish key system-level leverage points and barriers to effective pupil engagement and positive experience, therefore providing insight into how MHWB interventions can be effectively co-developed with primary school pupils in future developmental programmes. The first section will focus on system leverage points; the second subsequently highlights key barriers.

7.2. Theoretical approach

Where the various theoretical constructs used in the previous two chapters could be operationalised to explore the development, transmission and enactment of MHWB policy messages, additional theoretical constructs are necessary to frame how pupils experience these. Constructs are particularly required to unpack further the leverage points and barriers within the specific intervention practices resulting from schools' enactment processes, and ascertain whether enacted messages which result in specific interventions are experienced by pupils in the ways intended by schools. Therefore, experiences of policy messages are the final link in exploring the effectiveness of developed, transmitted and enacted messages. As noted previously, primary school pupils' experiences of MHWB interventions is a key gap in the literature, and these experiences will be explored to establish the potential importance of developed and transmitted policy messages and to consider key recommendations for future policy development.

This chapter applies the concepts of liminality (Atkinson and Robson, 2012; Turner, 1967) to the analysis of pupils' experiences of schools' intervention practices within 'emotional spaces'. Liminality 'entails an effective separation from the everyday routines and entry into an alternative social encounter in which different rules, different values, and different relations apply' (Atkinson and Robson, 2012, p. 1350).

Another key element within liminality is the idea that ‘communitas’, a community of trust and equality, can be developed (Turner, 1967), through the erosion of ‘everyday hierarchies’ (Atkinson and Robson 2012, p. 1351).

These concepts will be explored in relation to schools’ recontextualisation practices, and from the findings of the previous chapter, which documented how at both Holloway and Rangers, staff looked to cultivate emotional spaces with different environments, rules, relationships and expectations, which were based on their own contextual considerations. As the reader will see throughout this chapter, liminality as an overarching concept maps onto schools’ recontextualisation practices, particularly the aim for separation of values and relations (Atkinson and Robson, 2012). Liminality therefore can provide insight into pupils’ experiences of these practices, and generate contextually-relevant recommendations for schools and policymakers that are founded by their understandings. These recommendations will be considered in the following chapter.

Although different theoretical approaches will be used within this chapter, the overarching complex adaptive systems-focused framework exploring system emergence (Greenhalgh and Papoutsi, 2019) will again be used. The concept of sensemaking is perhaps particularly relevant to illuminating pupils’ experiences, however the self-organising, recontextualisation practices of schools (Greenhalgh and Papoutsi, 2019; Bernstein, 2000) and the cohesiveness of interdependencies that set the foundation for the development and transmission of MHWB policy messages are undoubtedly important. Returning to the conceptual framework one more time, the key area of inquiry established to answer the research question is to explore how the context of the inner setting affects how pupils engage with and experience interventions, as well as establishing whether the context of the outer setting (Damschroder et al., 2009) also influences their experiences.

7.3. Re-imagining emotional spaces

This section considers the existence of liminality in emotional spaces as three distinct concepts; firstly the dissolution of rules and expectations (Atkinson and Robson, 2012), secondly the erosion of hierarchies in favour of developing

'communitas' - Turner (1967) considers this a 'sociality based on equality and trust' (Atkinson and Robson 2012, p. 1351, citing Turner, 1967). Thirdly, viewing MHWB interventions as 'transformative' spaces (Atkinson and Robson, 2012, p. 1354).

This section firstly applies the concept of liminality in relation to pupils' experiences of MHWB intervention programmes, and will return the reader to schools' recontextualisation practices. Both Rangers and Holloway engaged in de-formalising practices, though approached this in different ways. Staff at both schools, particularly key intervention agents, sought to erode the traditional rules and expectations that they had of pupils in academic spaces. De-formalisation had a clear impact on pupils in these interventions, particularly in the cultivation of trust, as well as on pupil autonomy and agency. Privacy in specifically-demarcated physical spaces used for MHWB interventions was a key leverage point at Rangers.

Schools also de-stigmatise their intervention approaches. Examples of this is the reframing of selective interventions to ensure pupils felt they were not being '*pulled out*' of class. Pupils noted how they '*didn't even realise I had it*' in relation to selective MHWB provision, suggesting that concerns that selective school-based MHWB interventions can be stigmatising for pupils (Gronholm et al., 2018; Lupien et al., 2013; Rapee et al., 2006; Weems et al., 2015; Werner-Seidler et al., 2017) can be alleviated with the leverage points discussed in this chapter. The second sub-section concentrates on key intervention agents Clara and Daniel, exploring their specific impact on the development of intervention practices as liminal. Data presented in the final section provide an insight into pupils' experiences in cases where liminality and communitas feasibly exist. In these delicately cultivated spaces, pupils take ownership of spaces, practices and interventions – this is shown in the data showcased in the final sub-section.

7.3.1. De-formalising and de-stigmatising spaces

This section contains data from both Holloway and Rangers. The first half will detail pupils' experiences of Holloway's intervention practices of de-formalisation within the Emotional Literacy Support Assistant (ELSA) programme. The second will focus on pupils at Rangers and their experiences of the 'Cwtch' room. Schools'

implementation of these interventions were introduced in the previous chapter. During conversations with pupils at Holloway about their thoughts on the school's ELSA programme, it was clear that components or sessions within the programme were effectively de-formalised by staff, but particularly by Daniel, the key ELSA-trained member of support staff introduced previously. The process of de-formalisation that school staff undertook seemingly influenced pupils' experiences of these programmes.

The following passage, between Katie and Daniel, illustrated the *communitas* (trust and empathy) that had developed between the two within the emotional spaces of ELSA. The emotional spaces of ELSA did not have one physical location, such as a breakout room, but were frequently changing based on Katie's preferences, or were often chosen collaboratively. The below extract from an interview with Katie, Jess and Daniel signified the dissolution of rules and expectations, particularly regarding expected pupil behaviour and communication.

Daniel: We were doing two days [of football practice] a week, because we had to get ready for this big tournament, and now we've gone back down to one. This is why she's saying "I can't believe we're only doing one now"

Katie: That's rude, mate (laughing). Mr. L. we're...

Steve: Are there any other clubs that you two enjoy?

Katie: I was going to Dance Club, but I didn't want to. Because before... Can I use the yellow after you?

Daniel: There's a yellow highlighter there, mate.

(Katie, KS2 pupil, Holloway)

Katie's ability to call Daniel, a member of school staff, '*mate*', and not be reprimanded conceivably demonstrated the equalising approach of *communitas* between staff and pupil that was afforded specifically in the emotional spaces. Instead of reprimanding Katie, Daniel used similar language to her, and this was a good illustration of the type of relationship that had developed, and there were other instances of where he used this term with both male and female pupils. As well as the dissolution of rules and expectations, Daniel's language and engagement with

Katie signalled his ambitions to erode the traditional hierarchies usually found in the school setting.

It is suggested that the effective development of liminality and *communitas* within ELSA intervention practices was also possible due to the Daniel's position within the staff structure. Feasibly, as a member of support staff, he was able to use his non-teaching status, a factor considered important by both Daniel and his colleagues in the previous chapter. As noted in this section, Daniel's positionality meant he was conceptually distant from the academic realm to conduct emotional work, and this relatively advantageous position for *communitas* and the practices of liminality in emotional spaces, was arguably reflected in his language as well as the general relationship that had been developed between Daniel and Katie, supporting Niebieszczanski et al.'s (2016) work where key staff could 'be' the intervention. Therefore, effective development of liminality and *communitas* within intervention practices was likely helped by the unique positionality of key staff such as Daniel.

Furthermore, when discussing the 'Helping Hand' intervention, all pupil groups were aware of this universal MHWB approach and, more importantly, of their five nominated adults. The Helping Hand was described by one pupil as where '*you have a problem, and you want to go and tell someone*'. KS2 pupils found having their nominees particularly useful when outside (for instance during playtimes). Privacy, trust and empathy were viewed as a crucial element of the intervention: firstly that they could trust that their five nominated adults would take their problems seriously, and secondly that the conversations would be confidential within the parameters of the school's child protection policies. In most conversations with pupil groups, pupils were confident of their own choices, and that their peers also had the emotional support needed:

Annabel: I have a helping hand, 'cause in our trays like in the start of Year 5, and for the people in Year 6, we always do a helping hand, no matter like which year we are in. Then like, when we're sad we know who to go to, to tell our problems to, and they're really helpful.

Ffion: I don't have a helping hand.

LSA: Do you not?

Ffion: No.

Annabel: Well yeah, 'cause you came a bit later, after we did the helping hand thing.

LSA: Oh, I'll get you one.

Ffion: I still got people.

Annabel: Yeah, you still know who's going to do that.

(Annabel and Ffion, KS2 pupils, Holloway)

Emotional spaces at Holloway were therefore sufficiently designed in a way that left pupils in no doubt as to their five choices (*'I still got people'/'Yeah, you still know who's going to do that'*), which was a clear leverage point for successful reception of interventions by pupils. The intervention, operating in the de-formalised emotional spaces, which were effectively chosen by pupils who had autonomy and agency to decide where, and with whom, to engage with, afforded pupils privacy and confidentiality, which many discussed as a positive. For example:

*If we have a problem or a worry, they'll [**the school**] will help us, so we've got a helping hand. So it's a hand and um, we write um, five people that we trust on each finger and if we have a worry we'll go to them and tell them what our worry is and they'll sort it out and it'll be private.*

(Beth, KS2 pupil, Holloway)

The Helping Hand intervention was a good illustration of the importance of senior leadership teams' (SLT) investment in programmes – in this intervention, all of the SLT including the head teacher, communicated to the pupils that they could choose any member of staff for each of their selections. Pupils seemed to respond well to this, and several participants talked of how they could go and *'have hot chocolate'* with Mrs. Samuels (Marie, the headteacher). Moreover, pupils were sure about the ability of staff to help support them when they needed (*'we'll go to them and tell them what our worry is and they'll sort it out and it'll be private'*). Also, in one paired interview, one of the pupils enquired whether members of the SLT were also taking part in the fieldwork, asking the LSA present, *'you've done yours?'* For them, it seemed important that it was not just the pupils sharing their perspective on the

school's approach to wellbeing, but also staff. Moreover, the intervention, bolstered by the school's efforts in flattening the hierarchy through whole-school investment, from SLT to support staff was clearly communicated to pupils.

As we have seen, staff at Rangers engaged in de-formalising processes within the Cwtch room as part of their recontextualisation of policy messages. They looked to create an emotional space where pupils could signal at any time that they wanted 'time out', and where they could 'go for a chat'. Whereas at Holloway, emotional spaces were perhaps more 'ad hoc', but were conceptually distant from academic realms through the schools' recontextualisation practices of flattening the school hierarchy. At Rangers, these spaces, including the Cwtch, were also physically designed as a demarcation of the differences between academic and emotional spaces within the school. In Chapter 6, staff such as Paula, an LSA noted how the Cwtch room had been reimagined, from an 'old-fashioned SENCO intervention room where the children would be pulled out', to something more resembling a home-like space. Pupils reflected on this transformation positively:

Steph: Well, let's have a look which one ... Oh, the Cwtch, being able to use different areas of the school and the Cwtch and everything, because I feel like when people need to calm down and they can just go to the Cwtch and it really helps, 'cause it's like a place where they can have a little bit of time to their selves and...

LSA: Yeah.

Luke: Yeah, and it's really nice.

Steph: And calm down.

LSA: Do you think that's important?

Steph: I like it.

Steve: So what's important about the Cwtch is it kind of how, what it looks like or the sort of the space, or what is it?

Steph: The space looks nice and it, it's...

Luke: It's like where you got, like, well they do, they do learning in there like, and then there's, and like if you like talk to someone

as in like, yeah, and then it's really like, really like nice. There's like books, there's a sofa, fish, yeah, the fish are really old.

LSA: They are very old fish.

Luke: Yeah.

LSA: You're right.

Luke: They were in there in the Reception class.

Steve: It sounds a bit like a living room almost?

Luke: Yeah.

Steph: Yeah, it's very nice.

LSA: And do you feel able to talk in there, when you go in the Cwtch?

Steph: Yeah.

(Steph and Luke, KS2 pupils, Rangers)

Pupils viewed the relationships and interactions that they had in the Cwtch room as positive, mentioning that '*if you like talk to someone [in the Cwtch], then it's really like, really like nice*', as well as being a place where they could have '*a little bit of time to their selves*'. Likewise, where Holloway's de-formalisation practices led to the affordance of privacy and self-expression, the Cwtch offered similar environments for their pupils:

Steve: Okay, that's an interesting one then Jack, do you just want to talk a little bit about that one, the being able to use different areas of the school?

Jack: Well yeah, because it's sort of like, um, if we didn't have these areas we'd have to do it in the class, so if we didn't have this room, or the Cwtch, or, um, any...

Lisa: [The hall. The hall]

Jack: ... of the other rooms we could go into, the hall, well we probably would have the hall, but we'd have to do it in the classroom, and I mean that wouldn't be private then. 'Cause if we did it in the classroom, everyone would know what we were doing, everyone knows who I am, who she is, anyone.

LSA: Mmm.

(Lisa and Jack, KS2 pupils, Rangers)

Pupils particularly gravitated towards the importance of privacy afforded by the 'Cwtch room' noting that the absence of this room would mean '*we'd have to do it in the classroom, and I mean that wouldn't be private then*'. They saw this room as in polarity with the classroom where '*everyone would know what we were doing*'.

Both Rangers and Holloway engaged in de-formalising practices, though approached this in different ways. At Holloway, relationships within the emotional spaces of the school were de-formalised via both staff and pupils' use of language. Moreover, staff – particularly key intervention agents – sought to erode the traditional rules and expectations that they had of pupils in academic spaces. This also applied to the erosion of hierarchies. The unique positionality of key staff is considered a key leverage point for the development of liminal intervention spaces. Staff conceptually distant from the academic realm were able to effectively conduct emotional work, and this afforded them an advantageous position. The ELSA and Helping Hand interventions are examples of this in process.

De-formalisation had a clear impact on pupils in these interventions, particularly in the cultivation of trust, as well as on pupil autonomy and agency. De-formalisation across the whole school hierarchy was also a key leverage point, supporting key literature highlighting the importance of SLT investment in interventions. Building informal relationships at Rangers was also part of de-formalising processes, however in their case the physical areas of the school where this occurred were more obviously demarcated, particularly with the use of the Cwtch room. Staff used the language of '*going to have a chat*' to communicate to pupils they would have different interactions in these spaces compared with the classroom and other areas of the school. Pupils responded positively, particularly to the privacy that these spaces afforded them.

How MHWB interventions were framed by school staff also played a significant role in their subsequent effect on the perceptions of KS2 pupils. Language used to de-stigmatise mental health interventions as something that occurred and was natural in the everyday was a critical element of the process of de-formalisation, but also, the labels and referents connected with specific interventions also affected how they were perceived. In one case, at Rangers, the ELSA programme, also one of many

approaches implemented by the school, was referred to as the *'Purple Pentagon'*. Though 'ELSA' as a term did not necessarily mean much, and from the other pupil-level data was not connected with a specific process of leaving class for a mental or emotional health reason, the process of assigning a name which was removed in any way from a process which might have led to stigmatisation, bullying, being ostracised by peers etc. was considered by staff as a useful device to mitigate any potential problems with the selective intervention.

In the following conversation, it was clear that pupils, reflecting back three years between Year 5 and Year 2, remembered the process of taking part in the ELSA programme, but at the time remembered it under a different guise. In one interaction with two year five pupils, they recollected their experiences taking part in ELSA in year two:

- Luke: Um, 'cause me and Steph had...*
- Steph: [We have the wellbeing wall]*
- Luke:: ... what's it called, ELSA, when we were in year two.*
- Steph: We didn't even realise we had it.*
- Luke: I know (LSA laughs)*
- Steph: We called it Purple Dragon.*
- Luke: Miss... just... Miss... no, Purple Pentagon.*
- Steph: Oh yeah.*
- Luke: Mrs Albery...*
- Steph: [Albery]*
- Luke: ... said, um, that, I'm gonna pick someone, some people to go out for, um, something with me.*
- Steph: Yeah.*
- Luke: And she picked us three, which I think was not a coincidence (LSA laughs), I think it was just, that was on her list...*
- LSA: [Okay]*
- Steph: [Yeah]*
- Luke: ... of people. Um, 'cause I was being bullied in year two...*
- LSA: [Oh]*
- Luke: ... and people calling me a girl for no reason.*

Steph: *Yeah and they were saying like 'oh [real name omitted]' and...*

Luke: *[Yeah], stuff like that.*

Steph: *Calling him names.*

Luke: *So, um, Miss Albery and Jane, who has left the school now, and, um, Steph, went to well this thing called Purple Pentagon, which was ELSA, so we named it that and we had like stuff to talk about, and like...*

Steph: *Yeah, she said 'tell me one thing that makes you feel happy'...*

Luke: *Yeah stuff like that.*

Steph: *Or, tell me one thing you feel excited for, or worried, or whatever.*

LSA: *Mmmhmm.*

Steve: *How did you find Purple Pentagon, did you like feel better afterwards?*

Steph: *Yeah.*

Luke: *Yeah.*

Steph: *Yeah, it made me just feel like oh I know that I don't need to worry, and I can just sort of ignore people that say stuff*

Luke: *Mmmhmm.*

Steph: *And I can stand up to people.*

(Steph and Luke, KS2 pupils, Rangers)

Ultimately, the pupils drew connections as to why they were selected for intervention – in the case of Luke this was because of being a victim of bullying (*'she picked us three, which I think was not a coincidence... 'cause I was being bullied in year two'*). Luke and Steph reflected positively on the experience of taking part in ELSA. It was clear from pupil interviews that awareness of ELSA developed as pupils got older within the school system. Another instance of this re-framing process by Rangers was evident in another paired pupil interview:

Ryan: *[What's that]?*

Steve: *Ah, mindfulness. So that is... that might be something you haven't done, which is absolutely fine, it's..*

LSA: *[Um]*

- Steve: *It's...*
- LSA: *We do do mindfulness in class. You probably don't realise you're actually doing it, you know when we talk about wellbeing, and things like that, and we think about [inaudible] things ... it's those sort of things. You know when you do, you know sometimes you can come to me as well...*
- Ryan: *[Yeah]*
- LSA: *... and we talk, and things like that, that sort of thing.*
- David: *Okay, I kind of like that, yeah.*
- (Ryan and David, KS2 pupils, Rangers)

From the data above, Rangers' de-stigmatising processes through the re-framing of selective interventions, where pupils reflected '*we didn't even realise we had it*', alongside the school's de-formal approach to delivering these programmes, was considered successful from the experiences of two pupils who had taken part in ELSA. The programme had seemingly helped Luke and Steph develop psychosocial skills such as confidence and self-esteem. Furthermore, Luke and Steph also discussed how they were able to name the ELSA programme, and this process seemed to be an important element in their engagement in ELSA intervention practices. Although the third sub-section will principally focus on pupils' ownership of interventions, the data presented in this section also suggest the naming of programmes to be another element of the ways in which pupils took ownership of interventions, and could also feasibly have contributed to the process of de-stigmatisation.

Examples of the erosion of everyday hierarchies were evident in Holloway's use of the Helping Hand intervention as well as Rangers' use of the Cwtch room, where interventions were linguistically communicated to students as '*going to have a chat*' where emotional spaces were '*built*' as home-like spaces (Rangers) or where senior staff were available for a hot chocolate (Holloway). Furthermore, previously theorised facilitators for effective MHWB such as SLT investment was considered as one component within this process of erosion. Other key facilitators for erosion were the positionality of key staff who effectively used their non-teaching status as a way to

cultivate *communitas* (Turner, 1967) with pupils particularly within selective intervention spaces.

De-formalising devices led to pupils in selective intervention spaces communicating with LSA staff on an equal footing, and this likely conveyed that pupils felt comfortable within these spaces. De-stigmatising devices were used by both schools which, though not directly linked to the theory of liminality could feasibly be analysed as contributing to the development of *communitas*, particularly trust. Staff at Rangers made clear decisions to cede agency to pupils regarding how they wanted to name and frame selective interventions including ELSA. Pupils took this on gladly and reflected positively on the importance of these interventions, also interestingly stating that '*we didn't even realise we had it*', referring to the group-based ELSA programme.

Some intervention practices and pupils' experiences of these could be analysed using all three concepts of liminality. In the context of the group-based and one-to-one ELSA at Holloway, a key selective intervention, dissolution of the regular rules and expectations around behaviour and communication that were paramount in most other areas of the school was a key leverage point for staff to develop spaces where pupils felt equal and valued. Data highlighted that in cases where these liminal practices were particularly prominent, pupils took ownership of selective intervention spaces which to a degree could be considered 'transformative'. Language of staff particularly in selective spaces could be analysed as contributing to the process of pupils taking ownership. As Jess mentioned, '*They basically believe in us... we don't believe in ourselves sometimes*', and Katie noting in regards to accessing one-to-one ELSA, '*I'm better than all of you, that's why I get it*'.

De-formalised and de-stigmatising practices therefore were particularly effective at providing a liminal space, and were often run by the key intervention agents who were both selected and self-selected within school structures. The development of liminal intervention spaces can therefore act as a counterpoise towards the potential for selective MHWB programmes to be stigmatising to students (Gronholm et al., 2018; Lupien et al., 2013; Rapee et al., 2006; Weems et al., 2015; Werner-Seidler et al., 2017).

7.3.2. The effect of key intervention agents: Clara and Daniel

Rangers and Holloway recontextualised policy messages by utilising the unique positionality of key support staff throughout the school. The experiential knowledge, values and affective events of these staff were utilised to maximise the potential for positive staff-pupil relationships focused on empathy and trust with certain staff both self-identifying and identified by colleagues as key MHWB intervention agents. These relationships, explored from the perspectives of staff, can be developed further using the lens of *communitas* (Turner, 1967).

The following sections of data provide insight into the positive effects of these recontextualisation practices by exploring pupils' perspectives on relationships with Clara and Daniel, two of the main staff responsible for delivering interventions. The presence of key support staff including Clara and Daniel within interviews provided an interesting dynamic where relationships between these individuals and pupils, particularly those engaging in selective interventions, could be featured. The following is an interaction between Beth, a KS2 pupil who had been selected for interventions including ELSA, and Daniel, focused on pupils' perceptions of the importance of school-staff relationships, and their experiences of these:

- Beth: My friends, and um, having a good relationship with my teachers*
- Steve: Why that one in particular?*
- Beth: Um, the teachers one?*
- Steve: Yeah, yeah*
- Beth: Because, like, I don't know, it's just easy to bond with them and, yeah, it's easy to bond with them and um, like they're just cool*
- LSA: That's nice*
- Beth: It's a compliment to you sir*
- Rosa: Not all of them*
- LSA: Did you say not all of them?*
- Rosa: Yeah*
- LSA: Do I need to block my ears for this bit?*
- Rosa: Um, no. You're cool. She said you weren't cool, she did.*
- Beth: You little liar*

Rosa: *She did*
LSA: *Good job she isn't in here then*
(Beth and Rosa, KS2 pupils, Holloway)

In this interaction, Beth and Rosa responded very positively to the presence of Daniel in the spaces of MHWB interventions, noting *'you're cool'* and *'it's a complement to you sir'*. Interestingly, though the language they deployed could be considered similar to that of Katie in the extract in the previous sub-section, these pupils showed both the confidence to joke with Daniel but the respect of calling him *'sir'*. Arguably this interaction shows that Rosa and Beth felt confident that different rules and expectations were in play in these spaces, compared with traditional academic spaces. Similarly, other pupil groups noted how *'I don't want different teachers [next year]'*, and when asked why noted how *'because I understand them, I don't understand nobody else'*:

Steve: *What is it in particular about the teachers you're with at the moment that you like?*
Jess: *They're funny*
Katie: *They're nice*
Jess: *They basically believe in us... we don't believe in ourselves sometimes and, um, Mr. L....*
Katie: *[...and then] Miss P or Mr L say 'you have to be confident in life'*
(Katie and Jess, KS2 pupils, Holloway)

Both Zara and Daniel are mentioned in this final interaction, and through pupils' perceptions, various aspects of their positionality can be considered as important leverage points for the development of effective emotional spaces, supporting Niebieszczanski et al.'s (2016) work where key staff could 'be' the intervention. The fact they note *'I don't understand nobody else'* and *'they're easy to bond with'*, could be analysed in terms of key school staff's positionality discussed in the previous chapter, where the analysis suggested their values, affective events, experiences helped them communicate with empathy and understanding. Their positionality and the affordances with which this provided, seemingly provided an environment where pupils felt happy and confident to engage with.

Similarly, pupils at Rangers documented analogous relationships with members of key support staff such as Clara:

Steve: Do you like to talk with sort of school staff as well about things, do you think that helps?

Steph: Yeah.

Luke: Yeah.

Steph: Like with Mrs. Paulsen, says like, 'oh if you have any worries you can just come talk to me'...

Luke: [Yeah].

Steph: ... and she sort of, she's just a nice person to talk to. And Mrs Jenkins is (LSA and Steve laugh). And other people are as well, just like you know the people to trust and you can always just say like, oh, can I just talk to you a minute about my worries in school and that, and it's the, they keep it private but if they need to talk to somebody else they do.

(Steph and Luke, KS2 pupils, Rangers)

This conversation highlighted a key leverage point for developing effective emotional spaces for MHWB interventions, both universal and selective, was in fact schools' recontextualisation practices of utilising the unique positionality of key support staff such as Clara and Daniel. Clara and Daniel's positionality feasibly created the conditions for their interactions with pupils within emotional spaces to be liminal, where *communitas* could be effectively developed. *Communitas* was clear in the above extract, with Steph noting '*you know the people to trust and you can always just say like, oh, can I just talk to you a minute about my worries in school and that, and it's the, they keep it private*'.

Data focused on schools' practices of utilising the unique positionality of key staff. Pupils noted how '*I don't understand nobody else*' in relation to Clara and Daniel, two key MHWB intervention agents who both self-identified and were selected by their colleagues as key individuals who drove forward the schools' approaches. Pupils certainly responded to these unique staff, and how they viewed their relationships with these staff was predicated on establishing mutual interest and the

understanding and subsequent trust through staff presentation as being '*one of us*'. Staff who perhaps did not invest in these relationships, or perhaps were less able to, were viewed differently by pupils. This thesis therefore argues that various elements of key intervention staff's positionality, including their values, experiences, affective events as well as non-teaching status – their position within school hierarchies and structures, time and resources – were enabling these positive relationships to flourish.

7.3.3. Taking ownership of emotional spaces

Data presented in this section provide an insight into more active engagement by pupils, in cases where liminality and *communitas* seemingly existed. In the following passages, which were focused on the emotional spaces of selective interventions, pupils to all appearances took ownership of these spaces, practices and interventions. Ownership processes were apparent particularly within the data produced with pupils at Holloway.

These processes are considered to be resultant from a number of factors, including schools' use of de-stigmatising linguistic devices, the de-formalised conceptual and physical spaces where MHWB and academic practices were demarcated effectively, and the positive effects of the unique positionality of key intervention agents. A further leverage point was identified from across the data sets from both schools, where pupils engaged more favourably in intervention practices where their privacy was centralised. A suggestible causal link is therefore made between these affordances and a higher rate of acceptance and ownership of interventions.

Pupil ownership of emotional spaces, and interventions, were particularly prominent in the context of the ELSA programme delivered at Holloway. In one paired interaction on the ELSA, a pupil (Katie) who was selected for one-to-one provision distinguished herself from her friend (Jess) also present in the pair, who was not participating in the programme during the research process. Katie took ownership of both intervention practices and the emotional space of the ELSA programme, including the physical environment in which the programme took place.

Jess : *What's 'the ELSA' mean?*

Daniel: *That's where me and Katie go out on a Friday, when just go out and have half-an-hour, just chat to check in with each other. Not only Katie, I do it with ...*

Katie: *[Where's ELSA Room?]*

Daniel: *... some of the other boys as well. It's the one over the new build.*

Katie: *Yeah, but what is ... It doesn't say ELSA Room on my sheet, look.*

Jess: *It's in there, look.*

Steve: *There you go, on the right-hand side.*

Katie: *Yeah, because ...*

Jess: *I want to go to the ELSA Room.*

Katie: *Yeah, I'm better than all of you, that's why I get it. Mr. L?*

Daniel: *Yeah?*

Katie: *Because we didn't do it last Friday, really quick, can I do it again?*

Daniel: *Yeah.*

(Katie and Jess, KS2 pupils, Holloway)

Far from feeling stigmatised by the process of selective intervention, Katie took ownership of this as something positive, which she communicated in the paired interview, noting *'I'm better than all of you, that's why I get it'* in reference to one-to-one ELSA provision. When asked by a pupil not referred to ELSA whether she could help and take part in the sessions:

Jess: *Can I, can I help?*

Daniel: *No.*

Jess: *Why?*

Katie: *Because you're not.*

Daniel: *Because it's their ELSA time.*

Katie: *It's my ELSA time.*

Jess: *What do ELSA mean?*

Daniel: It's, it's just a support thing. So we just, we just chat, make sure everything's okay in school. If there's anything that's not okay, then I can help her with it to make it okay

Katie: What's ELSA? Kind of the same thing?

Daniel: Yes, yeah.

Jess: Wish we could ban it.

Daniel: Yeah, that's what it's called, the thing that we do on a Friday.

(Katie and Jess, KS2 pupils, Holloway)

When asked what she enjoyed about ELSA, Katie noted how she likes how some of her peers were *'jealous'* of not having the one-to-one, and that she enjoyed her time with *'Mr. L.'* (Daniel). This was another interaction suggesting that Katie and Daniel had clearly developed an excellent relationship within the emotional spaces of ELSA. The quality of this relationship was evident from witnessing the interactions between Daniel and Katie in the research space, as well as with some of the other pupils who had been referred to the ELSA programme.

Many of the tangential asides from the interviews elucidated this, for example where *'Mr. L.'* would ask pupils questions such as *'did you get your fish after yesterday?'* showing genuine interest in and knowledge of many of the pupils' lives. He would also make many positive and encouraging comments in the interviews such as *'Jess is very expressive with her art'*. Equally, pupils would note how *'as soon as I come into school, I laugh. Sometimes seeing Mr. L., I laugh and smile'*. The school, through the key intervention agents therefore created an environment where pupils could take ownership and pride of their emotional *'work'*.

Equally, in another conversation across a pupil pair, where one pupil who had been selected for intervention, one who had not, ownership of the physical space where ELSA was delivered was claimed by a pupil who was signed up for the group version of the programme. Similarly to the above interaction, the pupil who was not part of ELSA didn't know what the *'ELSA room'* was, whereas the pupil selected for it replied that it was *'mine and Miss Morrison's room'*:

Rosa: What's the ELSA room?

Beth: *That's ...*
Rosa: *Frozen?*
Beth: *... that's ... yeah, that's the ...*
Steve: *Is it correct?*
Beth: *No. It's ... mine, that's mine and Miss Morrison's room.*
Rosa: *Oh. Okay.*
(Beth and Rosa, KS2 pupils, Holloway)

Considering pupils' experiences of both schools' intervention practices, the three core elements of liminality as theorised by Atkinson and Robson (2012), citing the work of Turner (1967) were arguably present where pupils reported positive experiences, which can be used qualitatively to theorise leverage points for effective intervention. The dissolution of rules and expectations were particularly evident in interactions between Daniel, Jess and Katie where the linguistic devices used, where language such as *'that's rude, mate'* would have likely been reprimanded in the academic, classroom setting, was accepted and considered a valid communication modality by Daniel, the ELSA-trained staff present at the interviews.

This dissolution of rules and expectations gave rise also to an erosion of hierarchies which foregrounded trust and equality. Furthermore, trust and understanding was a key part of how both schools utilised the unique positionality of key staff such as Daniel (Holloway) and Clara (Rangers), where pupils noted *'I don't understand nobody else'*. Within schools' recontextualised intervention practices, pupils were often considered equal and were treated as such. Flattened hierarchies were present in universal interventions: Holloway's use of the Helping Hand intervention as well as Rangers' use of the Cwtch room.

Based on the above data, this thesis concludes that the delivery of contextually-developed intervention programmes which were based on Holloway's recontextualisation practices, particularly the development of de-formalised interventions, created an environment that pupils were able to take ownership of emotional spaces. This ownership process was particularly evident at Holloway in their use of one-to-one and group-based ELSA. Much of the language used by staff in these spaces of selective interventions were of creating transformative spaces

(Atkinson and Robson, 2012) for pupils, and this was seemingly a significant leverage point in terms of pupils' reported experiences of these interventions.

7.4. Unclear separation of rules, values and relations: barriers to effectiveness?

Where the previous section focused on mapping various intervention practices to leverage points for effective MHWB intervention development, data presented below provide the counter-narrative, presenting cases of intervention practices which feasibly operate as barriers to effectiveness. Key leverage points for the development of effective emotional spaces, and the extent to which pupils positively experienced and responded to a range of schools' recontextualisation practices, were identified previously. Again, this section uses the analytical lenses of liminality and *communitas* to consider the effects of an unclear separation of rules, values and relations, a key component of creating liminal emotional spaces.

Considering the leverage points theorised from pupils' experiences, perceptions and interactions with key intervention staff in the research spaces, there were also suggestions of problematic consequences of schools' recontextualisation practices. Inter-school variation was deliberated throughout the previous chapter, and one of the key variances of significance was the extent to which schools resisted the individual-level policy messages of '*fixing*' individuals in favour of orienting towards school collaborators' messages broadly conjunctive with the World Health Organisation's Healthy Settings approaches as identified in previous chapters.

Two examples from Rangers are presented below, and these highlight the consequences of an unclear separation of rules and relations on intervention practices at the school level. Rangers delivered an intervention (introduced in Chapter 6) called 'Mile a Day', which was established as a universal physical and mental health intervention. The intervention worked as follows: every day all pupils had to run around the playground for a mile, with various members of staff responsible for monitoring pupils' engagement in this – for example by checking pupils' completion of the mile. The previous chapter suggested that school staff's implementation of this intervention could be analysed as a behavioural intervention,

and the way pupils relayed their experiences of this intervention varied significantly from those considered in previous sections which did not utilise such strategies.

In the interaction below, it is clear that pupils engaged in Mile a Day in similar ways to how they engaged in academic spaces for example in regular classroom lessons. From the data presented it is feasible that this was due to the ways school staff developed, framed and communicated the aims of the intervention. Where the intervention was developed with more behaviourist educational values in mind, pupils received and interacted with these in the ways they felt expected to. Using liminality to analyse these interactions, it is contended that in the spaces where Mile a Day functioned, insufficient separation between rules, values and relations between staff and pupils meant it was not a liminal space in the same ways that ELSA and Helping Hand achieved:

Steve: What about generally then do you think in the school, like, you know your classmates and other people in the school, do you think most people enjoy it, or?

Jack: Well I think it's like a normal class, it's a normal class in the way that there is people who are sometimes silly, and get told off, and there are some people who are, um, smart, some people who are, not stupid, but maybe not as smart as them, or, um, there's some people who listen to everything the teacher says, but that's very hard 'cause it's not, 'cause some people they, um, distract other people, and I mean it's not their fault that, um, you're not looking at the teacher 'cause someone else on the other class, on the other side of the room is, um, pulling funny faces behind the teacher's back (Lisa laughs). So, whenever the teacher turns around they suddenly look as though they...

Lisa: [Stop]

Jack: ... are doing their work, writing things down (Steve and LSA laugh) in their book.

Lisa: When they're not.

Jack: But they're not. And when they turn their back, and start helping other people, they're just pulling silly faces.

Steve: *So similar sort of things happen whilst doing the mile then?*

Lisa: *Yeah.*

Jack: *Yeah there are some people who don't take it seriously, so that's why now they've starting putting people in, like bibs...*

Lisa: *[Lifestyle committee really]*

Jack: *... and they've started making them run round the playground to try and start making people run more, and if they lap you...*

Lisa: *[Or overtake you]*

Jack: *... you get put on the wall and you get a warning, now.*

(Lisa and Jack, KS2 pupils, Rangers)

Evidence that pupils treated the Mile a Day intervention, in Jack's words '*like a normal class*', was clear in pupils' accounts from the above extract. Jack notes that during the Mile a Day pupils are often '*pulling silly faces behind the teacher's back*'. As a result, the school respond by enacting behaviourist strategies such as '*making [pupils] run round the playground*'. If pupils do not run and take the intervention seriously '*you get put on the wall and you get a warning*'.

The same levels of behaviourism, which reflecting back on MHWB policy messages developed, transmitted and enacted, were framed using policymakers', and some regional stakeholders', messages of character and behaviour education, were not evident from pupil and staff interactions on the topic of ELSA and Helping Hand, as well as the Cwtch room. These approaches were also evident where pupils at Rangers reflected on the newly-developed and implemented mindfulness interventions that were being trialled in Year 5, where they talked about how there existed pressures to be positive in inter-peer interactions in mindfulness spaces. Two pertinent examples included:

Alex: *Well, we do, we have like, like mindfulness activities we do, but we, sometimes do that after lunch, like when we come back into the class, after lunch and we do like, we've got to like pick someone out of um like a lollipop, whoever's name's on it, and we've got to like say something that we like about them.*

Kieran: *Yeah we do it every Friday.*

(Alex and Kieran, KS2 pupils, Rangers)

Sara: We've been doing the lollypop sticks thing, haven't we?

Charlie: Oh yeah, that's good, I like that

Steve: So what's that?

Sara: So we have to pick out, the teacher comes round and gives out, a lollypop stick and then she, erm, and then everyone gets one and we have to say something that's, erm, amazing about them.

(Sara and Charlie, KS2 pupils, Rangers)

Pupils viewed mindfulness as a way to developing self-actualisation and other psychosocial skills – ‘*a thing we sort of think about anything we can improve*’ - as well as for preparing themselves for the school day. They note that they often ‘do’ mindfulness during core lessons such as Maths and English. For pupils, like with staff, mindfulness included a range of activities including breathing, jars, cards, ‘*lollypop sticks*’ and colouring. These activities were developed by staff with the purpose of preparation and relaxation (breathing, colouring), or for developing self-actualisation, esteem and confidence (sticks, cards). Most of the pupils focused on the ‘*lollypop sticks*’ intervention when asked about mindfulness, with one pair describing further pressures to be positive to peers. This interaction illuminates the negative consequences of this approach:

LSA: So when you hear your name being called, what do you feel?

Sara: I'm like, oh gosh, I don't know, I don't know what they're going to say about me...

Charlie: If there's, like a, like a good friend then, like, you're not...

Sara: They're probably going to say friendly and...

Charlie: But if it's somebody you don't normally play with, say, you know, like a boy, and you don't know what they're going to say, 'cause sometimes they just don't say anything.

Sara: Yeah, but sometimes they pick out ones and then they're like, I don't know.

Charlie: And sometimes they're like, I don't know this person.

(Sara and Charlie, KS2 pupils, Rangers)

Although the pupils in these interaction were positive about how it was nice to receive compliments from others in the class, this only seemed to work effectively when pupils drew one of their friends from the lollipop stick collection. Conversely they noted how, when this was not the case, the mandatory compliment became difficult to make (*'sometimes they pick out ones and they're like, I don't know'*). This process suggests that where pressures to be positive perhaps overwhelmed pupils, specifically where they perhaps didn't really know what to say, or know much about the person, the consequences of this within a universal emotional space arguably weakened the aims of the intervention. Where pupils at Rangers engaged very positively in spaces granting them trust, privacy and empathetic responses, these spaces perhaps undermined the schools' larger approaches to MHWB due to how they interpreted and negotiated policy messages relative to intervention strategy.

7.5. Conclusion

Data in this chapter answered the third research question:

How do pupils experience the practices of universal and selective school-based MHWB interventions in light of schools' recontextualisation processes?

The key areas of inquiry to help answer the research question focused on how the context of both the outer and inner settings (Damschroder et al., 2009) within the supra-system affected how pupils engaged with and experienced the MHWB interventions implemented by Holloway and Rangers schools. In terms of considering how the inner setting (school level provision) impacted on pupil experience, this chapter delineated intervention practices with high engagement and positive experience with those with variable engagement and experience.

The chapter also considered that the three core elements of liminality (Atkinson and Robson, 2012; Turner, 1967), can be practically applied to the reimagination of emotional spaces of MHWB intervention, namely the importance of different rules, values and relations, the development of trust and equality (*communitas*) through the erosion of 'everyday hierarchies' (Atkinson and Robson 2012, p. 1351), and the importance of transformative spaces. Extant literature points towards the importance

of supportive staff-pupil relationships, and these findings corroborate the importance from pupils' experiences.

Based on the data, MHWB interventions that were practiced and experienced in a liminal way were those which were more positively experienced. Data drew connections between pupils' experiences of schools' intervention practices, notably de-formalising and de-stigmatising approaches. Pupils' experiences of de-formalising and de-stigmatising practices suggest that schools' intervention practices based on their recontextualisation of MHWB policy messages were largely effective in these realms.

Key intervention agents, Clara and Daniel, also had clear positive impacts from the perspectives of pupils. Data suggested that various elements of key intervention staff's positionality, including their values, experiences, affective events as well as non-teaching status – their position within school hierarchies and structures, time and resources – were enabling positive relationships to flourish. In this way, schools effectively 'mobilised' their resources (May et al., 2016) within their self-organising practices (Greenhalgh and Papousti, 2019), and the context of the 'outer setting' was perhaps a less important influence on pupils' experiences than what happened in the 'inner setting'.

However, whilst there were many positive pupil experiences which could be analysed using the lens of liminality and communitas (Atkinson and Robson, 2012; Turner, 1967), data presented suggest cautionary examples of where interventions were less well engaged with and experienced. Liminality serves also as a theoretical concept to consider the effects of an unclear separation of rules, values and relations, a key component of creating liminal emotional spaces. Data supported the claim that where liminality was not a key feature of MHWB intervention practices, pupils' experiences were less positive and much more mixed. Barriers to effective pupil engagement and positive experience in interventions were theorised in a key way, notably, where the rules, values and relations of interventions were too similar to regular pedagogic practice. Where there was unclear separation in emotional spaces, these were met with less positivity, particularly where behaviourist educational approaches were used in the development of interventions.

Liminality as an analytic concept has therefore been applied as a way to consider both the effectiveness of schools' recontextualised intervention practices, and pupils' experiences of these. This chapter has made conclusions and theorisations as to the more effective responses that schools have made based on their interpretation and recontextualisation of the MHWB policy messages developed and transmitted by policy, regional and community stakeholders. The following chapter will conclude the empirical chapters and discuss future recommendations for research in school-based MHWB provision.

Chapter 8: Discussion

8.1. Introduction

The central aim of this thesis was to explore the development, transmission and enactment of policy messages in complex adaptive systems, and theorise the impact of these processes on the implementation and pupil experiences of MHWB interventions in Welsh primary schools. The study research questions were as follows:

1. *What policy messages are developed by policy, regional and community stakeholders for school-based MHWB and how are these transmitted to schools at the community-school interface?*
2. *How do school staff enact policy messages and how do these processes affect the implementation of MHWB interventions in schools?*
3. *How do pupils experience the practices of universal and selective school-based MHWB interventions in light of schools' recontextualisation processes?*

The first section will situate the thesis and recap on the main justifications for undertaking the research, before reflecting on the data collected and analysed, addressing the research questions and the extent to which the thesis has attended to its main aim. It will also locate the thesis' findings within the wider research context of MHWB intervention practices in primary schools, commenting on the wider theoretical and practical significance of the findings and on the application and utility of theoretical constructs. This chapter will subsequently consider the research design and the limitations of the study. The discussion will conclude by providing recommendations for future research in the field.

8.2. Situating the thesis

Chapter 2 commenced with a consideration of the key UK and Welsh policy context relative to school-based MHWB provision, exploring the origin, rationale and debates around policies focused on the role of the primary school in delivering provision. Schools in the UK are increasingly regarded by central and Welsh Government and other key organisations in educational systems as crucial to the delivery of effective MHWB interventions. Policies communicating to schools the imperative, justification and strategy for intervention have arisen from the increasing prevalence of poor MHWB outcomes in children and young people (Green et al., 2004; Humphrey and Wigelsworth, 2016).

Primary schools in particular are considered important settings, morally and ethically, for early intervention and prevention of various mental health conditions due to latest prevalence statistics from the UK which document one in eight (12.8%) of five to 19 year olds had at least one mental health condition in 2017 (NHS Digital, 2018). Research has also found the average onset age for generalised anxiety disorder to be 11 years old (Collishaw et al., 2004; Kessler et al., 2005; Maughan et al., 2005), in the UK, the transitional age from primary to secondary education, and a key point in which primary schools can feasibly intervene. Recently, both English and Welsh school inspectorates have incorporated the evaluation of MHWB provision into their inspection frameworks (MacDonald and Winship, 2016), conveying to schools that this provision is now a statutory requirement alongside their core educational remit.

Emergent policy messages are subsequently founded on moral, ethical and legal justifications, and have culminated in an expansion of intervention programmes implemented in primary schools. Schools' MHWB intervention responses have taken the form of many guises, with social and emotional learning (SEL) one of the most popular. SEL focuses on strengths-based perspectives based on core competencies such as self-understanding, emotion regulation, motivation and resilience (MacDonald et al., 1998; Weare, 2010, 2000). In their review of the curriculum, Welsh Government have concentrated the importance of school-based MHWB within the 'Health and Wellbeing Area of Learning and Experience' (Donaldson, 2015). As of October 2020, the curriculum review is still ongoing.

However, the current evidence for school-based MHWB interventions is mixed, where positive intervention outcomes across domains including improved mental health, socio-emotional skills and academic attainment is undermined by key limitations, such as evidence suggesting many programmes lead to small, neutral or even negative effects. Wide-scale problems exist regarding implementation, particularly in terms of transferring interventions across contexts and the acceptability of interventions by school staff tasked with delivering them. Interventions have too infrequently been co-produced by key groups such as teachers, support staff, pupils, and mid-level policy actors ('school collaborators'). Subsequently, these limitations feasibly impact on the sustainability of these interventions in school settings.

Arguably, existing research insufficiently focuses on the context of schools and wider systems in which interventions are implemented. Developments in public health have increasingly considered schools as complex adaptive systems (i.e. Keshavarz et al., 2010) and suggest researchers focus on the context of these systems to better understand how the implementation of interventions can be effective and sustained over time. In response, this thesis utilised key complex adaptive systems frameworks to explore the context of interventions currently implemented in primary schools in Wales and the systems in which they are implemented.

This thesis builds on work by Keshavarz et al. (2010) who conceptualised the primary school as a complex adaptive system, and specifically developed the property of 'emergence' (Greenhalgh and Papousti, 2019) to advance a systems-wide understanding of school-based MHWB intervention development and implementation. This perspective can help researchers explore the origin of policy messages relative to school-based MHWB provision, how they are developed and transmitted from key policymakers in educational systems, subsequently enacted by school staff and experienced by pupils, providing much needed emphasis on systemic context.

Recent research has explored policy enactments in primary schools in England (Braun and Maguire, 2018), however pupils' experience of enacted messages in the form of school intervention practices have been largely absent from the research

literature. This thesis has applied both novel and more established theoretical frameworks introduced in Chapter 3, such as Bernstein's (2000) transmission context, Greenhalgh and Papousti's (2019) concepts of the emergent properties of complex adaptive systems, and the 'Context and Implementation of Complex Interventions' (Pfadenhauer et al., 2017), all of which have rarely, if at all, been applied to the field of school-based MHWB, and have been operationalised in response to extant research limitations outlined in Chapters 2 and 3, in particular the lack of attention to contextual relevance of the systems in which MHWB interventions are 'events' within (Hawe et al., 2009).

Though the study is not unique in terms of applying liminality (Atkinson and Robson, 2012; Turner, 1967) to health and wellbeing practices in primary schools, which has been explored by Atkinson and Robson (2012), it contributes to this emergent research literature, affirming the relevance and application of the main concepts of liminality, which offer a number of pertinent insights regarding pupils' experiences of interventions and subsequently on how policymakers' and schools develop, transmit and enact these. Furthermore, this thesis is one of the first, if not the only, qualitative study to explore the journey of MHWB policy messages from development and transmission, to impact on schools' practices and pupils' experiences of intervention.

The thesis therefore offers novel and unique insights into this systemic process, developing on calls in the research to explore system level implementation, sustainability and maintenance of interventions (Fazel et al., 2014). This contribution arguably provides guidance for policymakers, researchers and public health practitioners to develop policies allowing the development and implementation contextually-relevant MHWB interventions in primary schools.

8.3. Contributions of the thesis

8.3.1. Origin of policy messages: Exploring stakeholders' key justifications for school-based MHWB provision

Data presented in Chapter 5 substantiate and develop the research literature, attending to the following research question:

What policy messages are developed by policy, regional and community stakeholders for school-based MHWB and how are these transmitted to schools at the community-school interface?

Data suggest MHWB policy messages are developed based on stakeholders' observations of rising prevalence and need for MHWB provision in children and young people, as well as overburdened clinical services. Additionally, the findings showcase that stakeholders from policy, regional and community organisations draw from emergent literature linking good mental health and improved academic attainment (O'Connor et al., 2018; Henderson et al., 2014) and research suggesting the opposite relationship exists (Brännlund et al., 2017). They also interpret shifting children and young people's preferences for MHWB provision as moving further away from the clinical setting, which has been less well theorised. Though this last finding in particular adds unique perspectives to the literature, further research is required focusing on this phenomenon in more detail as findings from the empirical data were inferential on this topic and in need of further development.

The development and transmission of policy messages were analysed using the 'classification-framing dyad' of Bernstein's (2000) transmission context. Messages relative to the three core justifications outlined above were considered to be strongly-classified, namely where there existed clear cohesion and agreement between policymakers. These messages were also strongly-framed, where there existed clear knowledge that was to be acquired by schools. Data also suggested pressures on schools conferred an obligatory choice (Bennett et al., 2009; Sianou-Kyrgiou and Tsiplakides, 2009) to intervene, and this theory was particularly appropriate where strongly-classified messages were concerned. Obligatory choice refers to how personal agency is constrained, and 'choice' is rationalised and accepted in light of wider influences (Mannay, 2019).

In the case of MHWB provision, policy messages confer moral, ethical and legal pressures on schools which are rationalised and accepted in relation to wider circumstances (Mannay, 2019), namely evidence of rising prevalence of mental health conditions in children and young people. Stakeholders' accounts in this section created a fundamental need for school-based interventions, and were

founded by the participants' justifications presented in Chapter 5, and a clear responsibility and remit for schools to intervene to promote the mental health and wellbeing of pupils was therefore established.

8.3.2. Development and transmission: Establishing the relationship between conceptual confusion and weak systemic interdependencies

Chapter 2 presented counter-narratives in the research literature to the assumed need for school-based MHWB intervention. Ecclestone (2012, p. 464) critiques an assumed need for school-based MHWB intervention within the context of 'a revival of an old discourse of character' and the regeneration of political focus on behavioural psychology approaches. Renewed interest in character education was also considered by Brown and Carr (2019). Current UK MHWB approaches are considered as centralising agency and responsibility for MHWB at the individual, rather than the organisational or systemic, and both Ecclestone (2012) and Brown and Carr (2019) speak to the dangers of these policy messages permeating schools' intervention practices.

Data presented in this chapter, further answering Research Question 1 (above) suggest that MHWB policy messages developed are indeed initially focused on developing character and behaviour education, which relate to other research pointing towards the strategy of individualising responsibility (Brunila and Ryyänen, 2017; Schrecker, 2013) at the national, public policy level. Policymaking participants discussed the importance of the development of pro-social norms, behaviours and relationships in the strategy of interventions. However, school collaborators', considered mid-level policy actors by Singh et al. (2013) in extant policy enactment research due to their unique position in the system as key actors who advocated and worked directly with schools, directly opposed these discourses in regard to best-practice intervention strategy, noting '*you just can't say to someone, toughen up!*'.

Ultimately this disagreement created weakly-classified messages (Bernstein, 2000) as a result of the incongruence between stakeholders at the policy, regional and community (PRC) levels. Ecclestone's (2012) theory of conceptual confusion was

highly relevant as an analytical concept to this section of the data. Ecclestone (2012, p. 469) notes how confusion arises where the conflicting agendas of different organisations and individuals 'compete to define a problem and offer particular solutions'.

Extending on work conducted by Ecclestone (2012), focusing on system emergence provides unique insights into the problems with interdependencies in the system, particularly in the 'outer' setting of the supra-system (Damschroder et al., 2009). It was considered that various stakeholders at the PRC level of the supra-system were competing for agenda prevalence in the development of MHWB policy messages. Their ways of defining the problem (Ecclestone, 2012), notably how to effectively counter rising mental health conditions prevalence in children and young people, were substantively and diametrically opposed, and this clearly played out in their sensemaking processes (Greenhalgh and Papousti, 2019) regarding effective intervention strategy.

Data suggesting the development of 'weak' policy messages demonstrate why some policy messages are less well-effectively transmitted from PRC to school level. Messages related to intervention strategy and assessment were particularly victims of this confusion, and this created a climate of 'policy hyperactivity' (Clarke, 2012; Dunleavy, 1987) in the development of messages. Policy hyperactivity was an additional theory used to further explore the practical implications of weakly-classified and weakly-framed messages in relation to the transmission from PRC to school level, which will be discussed below. These data substantiate Weare's (2015) finding that schools often implement and subsequently drop MHWB interventions in response to policymakers' subjectivities and an ever-changing policy climate.

Analysis of data has applied and explored Ecclestone's (2012) notion of 'conceptual confusion'. This theory has been applied in a way which develops and complements Bernstein's (2000) transmission context. Empirical data in Chapter 5 strongly suggest that the 'classification-framing dyad' from Bernstein's (2000) transmission context is highly relevant as a theoretical construct to analyse the development of MHWB policy messages in primary schools, supporting extant evidence in other school settings and policy areas and contexts (Leow et al., 2014; Leow, 2011). This

thesis therefore extends the research utilising this theoretical framework and serves to further strengthen its relevance and application in school-based health intervention contexts.

The thesis looked to develop these theoretical constructs by integrating other theories as a way to further unpack the reasons for fractures in interdependencies as well as discontinuities of sensemaking processes. For instance, analysis in Chapter 5 suggested that strong, cohesive interdependencies between the PRC levels of the case study supra-system were destabilised by the subjectivities of policymakers, particularly in how they approached the assessment of school-based MHWB interventions (*'attendance, attendance, attendance'*). School collaborators' accounts suggest this approach was extremely unpopular and unacceptable to them: as a result of this policy hyperactivity (Clarke, 2012; Dunleavy, 1987) they had to second-guess policy in the face of shifting assessment regimes, supporting empirical policy enactment research conducted in primary school settings (Braun and Maguire, 2018). Interdependencies were arguably also further weakened by inter-agency tensions, which were likely manifest because of divergent sensemaking processes.

Policy hyperactivity, conceptual confusion (Ecclestone, 2012) and conflict (Cigman, 2012) were therefore considered relevant theoretical constructs to explore further all three of Greenhalgh and Papousti's (2019) systemic emergent properties, and provide various theorisations, for example how strong system interdependencies could be undermined, how different sensemaking processes created weak policy messages, and how in turn these factors affected the level of schools' self-organisation processes. The practical significance of poor systemic interdependencies at the PRC level, further weakened by incongruent sensemaking processes between stakeholders operating at this level, was that conceptually confused and hyperactive policy messages were seen by school collaborators to be *'bombarding'* schools. Myriad intervention providers were considered to be competing to problematise and provide solutions to schools, supporting Ecclestone's (2012) conceptualisation.

Chapter 5 theorised that this bombardment and competition meant that, instead of receiving clear guidance on the best approaches for improving pupil MHWB, schools

were overwhelmed by multiple competing agendas that were a 'collection code' (Ball et al., 2011b, p. 627) of divergent, confusing and weakly-classified messages which precluded schools from identifying relevant approaches from the evidence base. Data also suggest that poor systemic interdependencies underpinned by conceptual confusion, conflict, which created a climate of policy hyperactivity made the transmission of MHWB policy messages extremely difficult.

8.3.3. The practical effects of policy hyperactivity: Schools' search for contextually-relevant interventions

Empirical data in Chapter 6 focused on the experiences of school staff, responding to Research Question 2:

How do school staff enact policy messages and how do these processes affect the implementation of MHWB interventions in schools?

Analysis of data were predominantly data-driven, and data were presented regarding the practical effects of policy hyperactivity on how schools 'enacted' policy messages through sensemaking and self-organising practices (Greenhalgh and Papousti, 2019). Data suggested hyperactivity was prevalent and impactful, and therefore focus of the chapter was on exploring how schools 'coped' with this policy hyperactivity. The theoretical approach of policy enactments (Ball et al., 2011; Braun et al., 2011) was an overarching lens to analyse data produced with school staff at the two case study schools, Rangers and Holloway. A policy enactments lens was used to explore how schools interpreted and recontextualised policy messages into specific MHWB intervention practices.

Chapter 6 extended consideration of Bernstein's transmission context (2000) to exploring schools' possession of recognition and realisation rules. Schools possessed recognition rules, namely what the policy messages were about, their content and clarity, for strongly-classified and strongly-framed messages. Schools' possession of recognition rules were particularly clear regarding the moral and ethical rationale for intervention, the role of the school underpinned by the evidential

link between good mental health and academic attainment and the imperative for early intervention, an agenda foregrounded by Welsh Government. Additionally, schools' sensemaking processes (Greenhalgh and Papousti, 2019), categorised by their moral and ethical orientations, contributed toward clear acceptance of these messages, which can be considered an indication of effective transmission at the PRC-school interface.

Empirical data suggest that schools' recontextualisation (Bernstein, 2000) of policy messages into specific, contextually-relevant intervention practices was the result of their complex interpretation processes. These processes were evident where schools lacked the realisation rules of messages, namely clear guidance on how to respond to the content of messages and led to schools rejecting or modifying messages. Insufficient realisation rules can be traced back to the prevalence of weakly-classified and weakly-framed messages that were transmitted from community-school interface by school collaborators. Interpretation processes were common in relation to 'weak' messages relative to intervention strategy and assessment analysed in Chapter 5.

Findings therefore suggest that recognition and realisation rules are useful theoretical devices particularly when exploring schools' enactment of MHWB policy messages. They allow in-depth investigation of the reasons why policy messages are either enacted as intended, or 'recontextualised' (Bernstein, 2000) from the official 'field' of policy discourse to contextually-relevant, pedagogic 'action'. Where broad policy messages related to the legal, moral and ethical imperative to intervene were strongly-classified, data from interviews with PRC stakeholders suggest their development of imperative messages convey obligatory choice (Bennett et al., 2009; Sianou-Kyrgiou and Tsiplakides, 2009) on schools. More specific messages related to strategy and assessment became a 'collection code' (Ball et al., 2011b, p. 627) of divergent, confusing and weakly-classified messages in collaborators' perceptions, precluding schools from effectively identifying relevant MHWB approaches from the evidence base.

Greenhalgh and Papousti's (2019) concepts of the emergent properties of complex adaptive systems were used to explore whether and to what extent developed policy

messages produce effective and clear guidance for schools for the enactment and implementation of MHWB interventions. Emergent properties of complex adaptive systems – interdependencies, self-organisation and sensemaking – are considered excellent heuristic devices for theorising this process. For instance, interdependencies, namely the cohesion present between the different levels of the supra-system arguably need to be strong. Strong interdependencies were therefore viewed as facilitating effective development and transmission of policy messages. However, data in Chapter 5 strongly suggest that where broad messages relative to imperative for intervention were built on strong interdependencies, these were undermined by specific messages relative to intervention strategy and definition, measurement and assessment of provision, which were characterised by conceptual confusion (Ecclestone, 2012) and conflict (Cigman, 2012).

Sensemaking processes also provide insight into why interdependencies might be barriers to the effective development and transmission of policy messages. Sensemaking was particularly relevant to data presented relative to intervention strategy. The foregrounding of character education in policymakers' accounts were met with direct opposition by school collaborators, who drew upon healthy settings narratives as indicated by the World Health Organisation (World Health Organisation, 1986; World Health Organisation and WHO Global School Health Initiative, 1996). Discontinuities in stakeholders' sensemaking processes were also highly visible from their discussions around intervention assessment.

Self-organisation as a concept was perhaps particularly relevant in analysis of schools' responses to developed and transmitted MHWB policy messages. Herlitz et al. (2020, p. 1) noted that schools' adaptation to interventions to 'existing routines and changing contexts appeared to be part of the sustainability process', suggesting further examination of the self-organising properties of school systems in relation to MHWB interventions would contribute to insights into longer term sustainability of positive effects of MHWB interventions.

Reflecting on the findings of this thesis, self-organisation processes provide further insight into inter-school variations observed from the data. For instance, Rangers and Holloway schools were operating within the same bounded case study, within

the same educational consortia, and geographic region. Although they were situated in different local authorities, many of the stakeholders interviewed had remit across both authorities. Schools' variable interpretations, enactment and intervention practices signal the importance of contextual fit of MHWB policy messages, further exploring the significance of much of the research in Chapters 2 and 3 pointing towards the need for further contextual-orientation within intervention development stages (e.g. Wigelsworth et al., 2016).

Schools' interpretation processes were therefore considered as attempts to make sense of messages (Greenhalgh and Papousti, 2019) in order to find the required realisation rules to effectively respond to demands from the PRC level. Ultimately, schools responded to policy hyperactivity by '*dabbling*' and trialling various MHWB interventions in search for contextual relevance. Contextual relevance was particularly a factor for messages regarding provision assessment, and inter-school variability contributed to interpretation processes. For Holloway, messages around intervention assessment were considered ostracising and ill-fitting for their unique socio-cultural, socio-economic and socio-political context (Pfadenhauer et al., 2017). Rangers found that relocation messages created a '*cocktail of pressure*' where these pressures were '*impossible to manage*', where it was '*worrying you can't deal with that*'. Both schools struggled to acquire realisation rules for strategy messages: they simultaneously endorsed and rejected messages where the content was conceptually confused and conflicted (Ecclestone, 2012; Cigman, 2012).

Three main recontextualisation processes were identified from the analysis. Recontextualisation was considered a self-organising process (Greenhalgh and Papousti, 2019). Firstly, schools made use of the unique positionality of key staff (such as Clara at Rangers and Daniel at Holloway) to undertake responsibility for MHWB provision, who arguably *were* the intervention (Niebieszczanski et al., 2016). Clara and Daniel both self-identified and were identified by their colleagues as key staff uniquely positioned and skilled to undertake this emotional work, and they subsequently exercised agency over schools' intervention processes (May et al., 2016). Their propensity and ability to effectively take responsibility for schools' MHWB intervention practices were predicated on their positionality (Banks, 1996;

Kirk and MacDonald, 2001; Rehm and Allison, 2006) and experience of affective events (Niebieszczanski et al., 2016; Weiss and Cropanzano, 1996).

The literature on context has suggested focusing attention on the personal characteristics of implementation 'champions' of change (Bonawitz et al., 2020). This literature found that key characteristics were influence, ownership, physical presence at the point of change, persuasiveness, grit, and participative leadership style. However, this study develops on this literature, finding that personal characteristics of key implementation agents such as Clara and Daniel, important for both enactment and experience of MHWB policy messages and schools' intervention practices, can be explored using theories focused on individuals' biographies.

Secondly, schools de-formalised emotional spaces to ensure they could develop positive staff-pupil relationships. At Holloway, emotional spaces were considered more in conceptual terms: it was less the physical spaces that were considered key to success by staff, rather the flattening of traditional academic hierarchies using interventions such as the 'Helping Hand'. At Rangers, spaces were considered primarily in physical terms with specifically demarcated spaces such as the 'Cwtch room' re-imagined to develop relationships. At both schools, pupils were given more agency to take control over how they engaged with these spaces by staff.

Schools' recontextualising and self-organising practices can be linked back to the development and transmission of policy messages. For instance, thirdly, both schools (Holloway in particular) strongly resisted the policy messages of character and behaviour education prominent in policymakers' accounts in Chapter 5, which focused on the individualisation of responsibility and arguably on the '*fixing*' of individuals. They instead clearly orientated towards collaborators' (Singh et al.'s (2013) 'mid-level policy actors') preferences for organisational-level responsibility and change. To achieve this, they communicated clearly with pupils that blame and responsibility were not applied in MHWB contexts, clearly de-stigmatising MHWB spaces within the schools.

At both Holloway and Rangers it was important that emotional spaces had different environments, rules, relationships and expectations, and it was in these approaches

that clear distinctions arose between official and pedagogic fields of discourse (Bernstein, 2000) relating to MHWB interventions. In this way schools de-stigmatised emotional spaces and their MHWB intervention practices. Ultimately, considering all three recontextualisation processes, for both schools it was important that emotional spaces had different environments, rules, relationships and expectations. However, intra-school variation did exist, particularly in relation to Rangers' recontextualisation practices. Rangers perhaps had more difficulty interpreting the hyperactive policy messages relating to intervention strategy, using arguably conflicting messages differentially focused on individual, behaviour change educational strategies, and school collaborators' transmitted messages which cultivated an environment of de-stigmatisation.

Therefore, this thesis makes connections between weak interdependencies (Greenhalgh and Papousti, 2019) at the PRC level and problematic interpretation at the school level. One hypothesis which could be tested by future research is that weaker interdependencies which are resultant from discontinuities in sensemaking processes create transmission problems and a higher prevalence of recontextualisation and self-organising practices by school staff when looking to convert policy into intervention practice. Here, the final element of Greenhalgh and Papousti's (2019) concepts of emergent properties of complex adaptive systems, self-organisation, is highly relevant.

Data presented in Chapter 6 arguably reaffirm calls in the research to explore the context of systems and their interactions with interventions in Chapters 2 and 3 (e.g. Pawson and Tilley, 1997; Hawe et al., 2009; O'Cathain et al., 2019). Furthermore, they point towards the methodological importance of tracing the origin and aetiology of implemented interventions as a potential research pathway to furthering attention to the complexity of systems and their interaction with interventions. Thus, future research would usefully develop contextual thinking in the field by applying this approach.

Theoretical models such as Bernstein's (2000) transmission context do provide researchers with analytical tools to consider how and why certain policy messages prevail, and why some are rejected from the system in schools' self-organisation

practices (Greenhalgh and Papousti, 2019). Elements of these models including the 'classification-framing dyad' and recognition and realisation rules do help researchers consider how and why systems and supra-systems are not working as effectively as possible, and Greenhalgh and Papousti's (2019) properties – interdependencies, self-organisation and sensemaking – provide very relevant tools for further exploration. However, these models only provide so much insight, and do not provide a clear link between pupil engagement in and experience of MHWB interventions and the development, transmission and enactment of policy messages. Therefore, additional, complementary theories were required to achieve the aims of the thesis relative to exploring pupils' experiences of school intervention practices.

8.3.4. Exploring pupils' experiences of schools' intervention practices and identifying leverage points and barriers to experience and engagement

Data in Chapter 7 answered the final research question:

How do pupils experience the practices of universal and selective school-based MHWB interventions in light of schools' recontextualisation processes?

Where the various theoretical constructs outlined in the previous section are considered relevant and applicable for consideration of the development, transmission and enactment of MHWB policy messages, these are viewed as less applicable to pupils' experiences of schools' intervention practices that result from enactment of developed and transmitted messages. Therefore, additional theoretical constructs such as liminality and communitas (Atkinson and Robson, 2012; Turner, 1967) were necessary. These theories were considered relevant devices to explore the enactment to experience process, as a way to unpack further the leverage points and barriers within the specific intervention practices resulting from schools' enactment processes in Chapter 6, and to ascertain whether enacted messages which result in specific interventions are experienced by pupils in the ways intended by schools.

Chapter 7 built upon the use of liminality and *communitas*, which has been applied to social and emotional wellbeing practices in primary schools previously by Atkinson and Robson (2012), specifically relative to arts-based health interventions. This thesis looked to explore this theoretical construct and test its relevance to MHWB intervention practices in the primary schools featured within the supra-system case study. Atkinson and Robson (2012) document the three main elements of liminality: the importance of different rules, values and relations, the development of trust and equality (*communitas*) through the erosion of 'everyday hierarchies' (Atkinson and Robson 2012, p. 1351), and the importance of transformative spaces.

Data presented in Chapter 7 were used to explore the application of liminality in MHWB intervention practices, specifically how the concept can be utilised to theorise system-level leverage points and barriers for effective intervention practices, from both the perceptions of KS2 pupils at Rangers and Holloway. Liminality as a theoretical concept was developed due to its relevance and applicability considering the recontextualisation practices that both schools engaged in, notably utilising the unique positionality of key staff, de-formalising emotional spaces in favour of foregrounding positive staff-pupil relationships and resisting the policy messages of '*fixing*' individuals in favour of centring de-stigmatising practices, trust and healthy expectations, where staff employed discourses such as '*I don't expect you to be perfect*'. The success of these practices were based on the cultivation and existence of liminality. These practices acted as effective counterpoises to concerns in the literature about the stigmatising effects of selective MHWB interventions (Gronholm et al., 2018; Lupien et al., 2013; Rapee et al., 2006; Weems et al., 2015; Werner-Seidler et al., 2017).

Liminality is considered a useful analytical device to explore pupils' experiences of schools' intervention practices. Firstly, whether schools' intervention practices are experienced by pupils in the ways intended by schools, secondly, a way to consider leverage points and barriers to positive experience and engagement in universal and selective interventions, and thirdly, as a broader theoretical lens to deliberate leverage points and barriers to effective MHWB intervention.

Empirical data with Key Stage 2 pupils at both Holloway and Rangers schools suggest that universal and selective MHWB interventions that were both practiced and experienced as 'liminal', i.e. having the core components listed above, could feasibly be considered as more effective based on pupils' experiences of, and perspectives on, these interventions. Chapter 7 drew connections between schools' intervention practices of de-formalising and de-stigmatising emotional spaces and the staff-pupil relationships that took place within these.

Pupils' perspectives in Chapter 7 suggested their experiences of interventions with liminal components more positively than those that were not. For instance, from Chapter 6, examples of the erosion of everyday hierarchies (Atkinson and Robson, 2012; Turner, 1967) were evident in Holloway's use of the 'Helping Hand' intervention as well as Rangers' use of homely emotional spaces such as the 'Cwtch room', where interventions were communicated to students as *'going to have a chat'*. Schools' de-formalising devices created equalising relationships between staff and pupils across both universal and selective interventions, though more evident in the context of selective interventions such as the ELSA programme at Holloway. Pupils' responses to interview questions about these interventions suggest that they felt comfortable in these de-formalised environments.

Similarly, the effect of schools' de-stigmatising devices, though not a direct application of the theory of liminality, could be analysed using *communitas* (Turner, 1967; Atkinson and Robson, 2012), particularly the element of trust. Examples of these processes were particularly prominent in Rangers use of ELSA, where pupils *'didn't even realise we had it'*. These interventions were positively received by pupils. Positive relationships, another core element of liminality, and especially the cultivation of trust and equality (*communitas*) were facilitated by both schools' key recontextualisation practice of foregrounding specific members of staff with unique positionality (Banks, 1996; Kirk and MacDonald, 2001; Rehm and Allison, 2006). Pupils noted how *'I don't understand nobody else'* in relation to Clara and Daniel, two key MHWB intervention agents who both self-identified and were selected by their colleagues as vital individuals who drove forward and exerted agency over schools' intervention approaches.

Chapter 7 presented the claim that various elements of key intervention staff's positionality as focused on in Chapter 6, including their values, experiences, affective events (Niebieszczanski et al., 2016; Weiss and Cropanzano, 1996) as well as non-teaching status – their position within school hierarchies and structures, time and resources – facilitated positive relationships to flourish. Other key facilitators for erosion of hierarchies were the positionality of key staff who effectively used their non-teaching status as a way to cultivate *communitas* (Turner, 1967) with pupils particularly within selective intervention spaces.

Positionality of key staff such as Clara (at Rangers) and Daniel (at Holloway) were both facilitators for positive pupil experience and engagement in MHWB interventions in terms of their non-teaching status and their subsequent ability to help catalyse the dissolution of rules and expectations. In cases where liminal practices were particularly prominent, pupils took ownership of selective intervention spaces. In this way they feasibly provided transformational spaces (Atkinson and Robson, 2012) for pupils. De-formalised and de-stigmatising practices therefore were particularly effective at providing a liminal space, and were often run by the key intervention agents who were both selected and self-selected within school structures.

The theory of liminality was also used to explore and consider the effects of an unclear separation of rules, values and relations within the emotional spaces of MHWB interventions. Pupil-level data suggest that where liminality was not a key feature of emotional spaces and schools' MHWB intervention practices, pupils' experiences of these were largely less positive and more mixed compared with instances where liminality existed.

Ultimately, where the rules, values and relations of interventions were too similar to regular pedagogic practice, and there was unclear separation in emotional spaces, these were met with less positivity by pupils, particularly where behaviourist educational approaches were used in the development and implementation of interventions. Key examples of these practices were Rangers' use of the Mile a Day intervention. Findings from this thesis therefore expand upon previous critiques of school-based MHWB intervention practice outlined in Chapters 2 and 3 (e.g.

Ecclestone, 2012; Myers, 2012; Brown and Carr, 2019) and the associated cautions as to the dangers of applying behavioural theory to MHWB interventions, using the theoretical lens of liminality.

Pupil-level findings develop the existing research base, which though has pointed towards the importance of the right teachers as contacts for interventions, has been limited in exploring pupils' perspectives on fundamental support staff who take responsibility (or are allocated responsibility) for MHWB intervention practices. Methodologically, this research arguably could offer new insights into the interactions between pupils and key intervention staff such as Clara and Daniel as they were present in pupil interviews. This research arguably therefore provides more nuanced insights into how schools' intervention practices are experienced and observed by pupils, and these perspectives offer further understandings for how future MHWB interventions can be developed.

The practical significance of using this overarching theoretical concept is that recommendations can be made based on the analysis of empirical data in Chapter 7. Though there has been an emergent body of research into the effectiveness of joined-up, whole-school approaches to enhancing the MHWB of primary school pupils, this research suggests that there are a number of further considerations which policymakers, 'mid-level policy actors' (Singh et al., 2013) – or 'school collaborators' - and schools can engage with when devising intervention strategies. For instance, pupil-level data focused on experience of and engagement in universal and selective MHWB interventions suggest that, as much as possible, the emotional spaces (whether conceptual or physical) should be kept separate from those considered academic spaces.

The concept of separation in this instance does not mean that MHWB intervention practice *should* be kept separate from the day-to-day running of schools, and does not contrast from the burgeoning evidence for the provision of whole-school approaches, rather the thesis findings suggests that the rules, expectations, interactions and norms that are placed upon pupils by staff, that were brought to significance by the use of liminality (Atkinson and Robson, 2012; Turner, 1967) as a

theoretical device, are key potential leverage points for the effective pupil experience and engagement.

8.3.5. Developing a systems-wide perspective on intervention development and implementation in complex adaptive educational systems

This thesis developed conceptual and theoretical methods for exploring the context of systems and the interventions which are implemented within them. To the best knowledge of the researcher, this qualitative study is the first to adopt a supra-system (Keshavarz et al., 2010) perspective on school-based MHWB interventions by exploring the development, transmission, enactment and experience of MHWB policy messages. The emergent properties of complex adaptive systems (Greenhalgh and Papousti, 2019) were considered a central way to explore how the properties of the supra-system affected how policy messages were developed and transmitted by policy, regional and community stakeholders, enacted by schools and subsequently experienced by pupils.

System emergence was ascertained from the synthesis of the literature in Chapter 3 to be a key lens with which to explore the contextual properties of systems and MHWB interventions, however specific ways in which to qualitatively explore these properties in order to generate theoretical propositions about the impact of systems-level influences on the development and implementation of MHWB interventions were required. To this end, context-focused frameworks such as those presented and appraised in the aforementioned chapter were identified and operationalised. A combined conceptual framework including key areas of inquiry were developed based on substantive elements of Greenhalgh and Papousti's (2019) properties of emergence – interdependencies, sensemaking and self-organisation - which were subsequently explored using the qualitative semi-structured interview.

This thesis concludes that frameworks focused on the emergence (Damschroder et al., 2009; Greenhalgh and Papousti, 2019; May et al., 2016) and context (Pfadenhauer et al., 2017) of complex adaptive systems are highly applicable to exploring the context of supra-systems tasked with developing and implementing school-based MHWB interventions. Greenhalgh and Papousti's (2019)

conceptualisation of the complex adaptive system is considered a useful heuristic device to structure the macro-level themes arising from interpretation of the empirical data, and particularly when considering the extent to which the supra-system is working to produce effective policy messages and guidance for schools in enacting and implementing MHWB interventions.

Qualitative studies exploring the context of systems housing school-based MHWB interventions are limited, and existing frameworks orienting towards contextual understanding have been infrequently used within qualitative research. Therefore, further work is required to establish the most effective contextual frameworks for understanding how the context of interventions interact with the context of systems, however this thesis has looked to create a foundation for this task.

Greenhalgh and Papousti's (2019) emergent properties are particularly useful for exploring the development, transmission and enactment of MHWB policy messages, and to the best of the researcher's knowledge, this thesis is the first study to apply these concepts to both the specific aims of the study and the wider field of school-based MHWB interventions. Furthermore, the integration of relevant theory from education, social science, public health and psychology to provide contextually-relevant ways of exploring complex adaptive systems frameworks and theories on an empirical level, was a central contribution.

The above are specifically unique contributions which to some degree address existing gaps in the literature as outlined in Chapter 2. These gaps include the lack of extant research exploring the context of school systems and the interventions they house, and how this information can contribute new, system-level insights into how future and existing MHWB programmes can be more effectively adapted and developed, having regard for sustainability and improved contextual-relevance.

8.4. Reflections on the study design

This section will reflect on some of the challenges and potential limitations of various aspects of the research, including the methodology, method and analysis, and

provide steps taken to mitigate these. Justifications and suggestions for future research in this area are also provided.

Chapter 4 introduced the instrumental case study, and its relevance for achieving the thesis' aims and objectives. On one hand, the case study was considered salient for exploring systems-level processes and their effect on schools' intervention practices and pupils' engagement in and experience of these interventions, and it is a method that can help researchers highlight salient social processes and dynamics 'through explicit acknowledgement of different perspectives on a single event' (Perry, 2011, p. 225). On the other hand, though the instrumental nature of the case study can be conceived as a methodological tool to examine 'an event (or series of events) which the analyst believes exhibits (or exhibit) the operation of some identified general principle (Perry, 2011, p. 223; Mitchell, 1983), it is not considered a way of producing generalisable data.

Steps were taken to mitigate the potential for a lack of representiveness, particularly at the school level, as only two primary schools were sampled. Extensive exploratory variable stratified sampling was undertaken to ensure socio-demographic, socio-economic and structural variability, based on FSM% entitlement, school size and urban/rural types. Schools were stratified across all three domains, particularly regarding FSM and urban/rural type, with a 41% variability in terms of FSM (3%-44%) and population density characteristics of the two schools maximised.

Further research across a larger number of schools and stakeholders at the public policy and community domains within educational supra-systems would help develop this evidence base and create conditions for stronger claims of generalisability. Also, cross-national studies would be a further way to explore, develop or refute the findings expressed in this thesis. These findings are therefore produced with this caveat and inherent limitation based on the methodology, however they are presented as useful developmental and foundational work, of which 'general principles' (Perry, 2011, p. 223) arising from the findings and key recommendations for future work can be tested and explored further by both quantitative and qualitative data.

Key limitations of the sampling were that demographic data were only collected for pupils at Holloway. Only year group information was provided by schools for pupils, and whilst the data analysis and subsequent presentation of findings could therefore factor in schools' socio-geographic, socio-political and socio-economic contexts (Pfadenhauer et al., 2017), the sampling processes possibly precluded nuanced, intra-school contextual findings from being presented. A further key limitation of the sampling method was that many of the findings, particularly in Chapter 5, were based upon the perspectives of Singh et al.'s (2013) 'mid-level policy actors', referred to in the data as 'school collaborators'.

Regarding the use of chain-referral sampling at the PRC level, whilst this proved to be an effective way to identify and contact potential participants, this is also limited by the networks of initial participants, which may feasibly have been based on friendships, existing professional relationships, and other networks which might have been positive, collaborative ones, potentially creating bias in the sample in terms of narratives inherent in participant accounts. It is contended that the study maximised its potential in recruiting as many public policy and community stakeholders as possible, based on the time and resource limitations of a single researcher.

However, one group absent from the supra-system was at least one representative from the Welsh school inspectorate (Estyn). As much of the analysis focused on their role within the system, especially with regards to the quantification and measurement of mental health and wellbeing outcomes in school-based provision, this perspective would have undoubtedly enhanced the analysis and provided opportunity for comparison and a balanced narrative. Unfortunately recruiting a representative was not possible even after much effort in this area.

As a result, where arguably in sections of Chapter 5 which focused on the development of MHWB policy messages were more balanced, and therefore afforded unique insight into the different sensemaking practices (Greenhalgh and Papousti, 2019) that underpinned messages relative to intervention strategy and assessment, later sections of Chapter 5, for example those focused on tensions in inter-agency working, were solely written from the perspective of data generated with school collaborators, and therefore these accounts are missing the perspectives of

policymakers. Therefore, further work exploring the development of these messages would ideally need to explore policymakers', particularly within the school inspectorate, experiences relative to inter-agency working and the collaborative processes which take place prior to message transmission. This work would feasibly provide more insight into how MHWB policy messages can be developed collaboratively and with regard to contextual relevance, a key recommendation which will be outlined below.

This thesis used variations on the qualitative interview. As noted in Chapter 4, interviews with policy, regional and community level stakeholders were conducted using one-to-one, paired or group interviews based on participants' availability and preference. Interactive pupil interviews were based on self-selected friendship groupings (Highet, 2003), as they have been considered by researchers including Highet (2003) to afford researchers insights into interactions between participants and their social relationships, as well as in creating a 'supportive social context [enabling] participants to engage fully in conversation' (Highet, 2003, p. 109).

The voices and perspectives of primary school pupils have often been absent from interventional research in MHWB in primary school settings, with the exception of key studies such as McCabe et al. (2017). The utility of various qualitative methods, such as one-to-one interviews, group interviews, workshops using creative and visual methods, has been conceptualised as positive, especially in regards to the philosophical and theoretical approaches of the new sociology of childhood (Lomax, 2012; James et al., 1998; Sutton, 2009) and the foregrounding of children and young people's lived experiences especially in the context of the mosaic approach (Clark and Moss, 2001).

However, the potential limitations regarding combining these methods should also be acknowledged. For example, some researchers foreground the argument that mixing qualitative methods should not be attempted uncritically, and that researchers should interrogate the potential differences that myriad methods might produce, particularly regarding the different research questions they can answer and the different types of data they might produce (Barbour, 1998; Padgett, 2016).

Notably, the production of different types of data is a key consideration. In this study, one-to-one interviews possibly afforded a particular data production climate where participants had the space to honestly convey their opinions, particularly grievances (Edwards, 2005) which were feasibly less possible in the context of group interviews, especially where participants were within the same place of work but employed at different levels within organisational hierarchies. Where ideally, at least within the data collection conducted with adult participants, it would have been preferable to standardise interviews as one-to-one encounters, the practicalities of qualitative data collection precluded this.

Likewise, in the pupil-level data collection, paired workshops were employed based on the mosaic approach (Clark and Moss, 2001), combining talking, drawing, writing, mapping, sticking etc., and were intentionally designed as flexible methods where child participants could engage with these processes in the ways in which they wanted to. Where this was a conscious methodological choice for the reasons detailed previously, this surely contributed towards the production of different types of empirical data, and this is detailed as a potential limitation. Critically, however, the secondary focus¹² of the project, to develop and evaluate methods for improving engagement of primary school pupils in mental health research, required an approach congruent with methodologies of the 'new sociology of childhood' (James, Jenks, and Prout, 2005) and co-production. Ultimately, the use of variations on qualitative methods are justified on a convenience and practicality basis with a caveat for the above limitations.

Though, it is important to acknowledge that the use of activities including drawing within participatory research frameworks have been criticised for their familiarity within everyday school work (Gallacher and Gallagher, 2008) where they are explicitly designed for doing so (Punch, 2002). Gallacher and Gallagher (2008, p. 506) note that 'in doing so, researchers are expressly taking advantage of children's schooled docility towards such activities'. Considering the notion of 'schooled docility' (Gallacher and Gallagher, 2008), it is not claimed that the method utilised by this

¹² Findings from this element of the study have been presented at both national and international conferences, and will be published separately in a journal article.

thesis fully eradicated this from occurring during pupil interviews. However the activities were not designed with this intention in mind. Moreover, interactive interviews with pupils were conducted in 'non-academic' spaces in the school, such as breakout rooms (the 'Cwtch' or Nurture room), which were designed to ensure the research was not seen by pupil participants as part of their school work.

The methodological processes for the collection of data presented in Chapter 7 (interviews with LSA staff present) potentially afforded insights into these interactions that would have been missed without their presence. Pupils responded positively to SLT investment in Holloway's MHWB interventions and being able to '*have a chat*' in designated emotional spaces at Rangers. However, the presence of LSA staff, mandated by both schools, feasibly made the process of fully 'informalising' the research more difficult.

Nevertheless, data from Chapter 7 suggest that in many ways the presence of key staff such as Clara and Daniel within the research environment created positive and unexpected affordances, which provided the researcher with observations of in-situ interactions between key intervention staff and pupils in the emotional spaces in which they experienced MHWB programmes. These affordances were perhaps more relevant in regards to selective interventions than universal. Furthermore, previous literature has insufficiently explored the role of non-teaching staff as key intervention agents, and findings from both staff and pupil interviews strongly suggest their importance within school systems.

Regarding the ways in which the data collection looked to explore various influences and determinants of children's mental health using the socio-ecological (SEM) model (McLeroy et al., 1988), it should be noted that the study only explored the in-school context of mental health provision. Though all of the SEM domains were explored, the community influence on health was only relative to community partners and organisations who delivered programmes within schools, the project did not explore community-level influences in out of school contexts as well as parental input.

Parental input and influence on school-based MHWB interventions has been theorised more widely in previous primary research as key for effective

implementation (Langley et al., 2010), however future system-level research should further focus on this domain of influence. Preferably these contexts would be investigated in future studies particularly where researchers wish to explore selective MHWB interventions in further detail, and the comparisons between selective interventions in biomedical environments (e.g. hospitals, specialist clinics) and school-based approaches, for a richer and fuller perspective on multi-agency approaches within supra-systems. In this project this was not a focus of inquiry, however due to the primary focus on the policymaking influence of the context of 'outer' setting (Damschroder et al., 2009) of the supra-system on school level provision.

During the data collection process there were a few key limitations which are considered. First, the flexibility required during the recruitment process has to be highlighted, and the potential effect of this on the 'recruitable' population. The study arguably suffered from a common problem faced by researchers in schools, that school gatekeepers exercised overall control over which pupils would be able to take part in the interactive interviews, even though the study used self-selected friendship pairings. The researcher had initially asked school contacts whether it would be possible to conduct interviews with pupils from a range of backgrounds and educational abilities. The researcher developed good rapport with main contacts in both schools, and was assured that pupils selected were representative across cohorts.

However, as noted above, pupil-level demographic data were only available for Holloway, who were possibly more transparent, by selecting equal numbers of students from each 'track' within the school. Rather than streaming pupils within each academic year group, the school took a more holistic approach appropriate to its socio-cultural context (Pfadenhauer et al., 2017), where 44 different languages were spoken and there existed a high turnover due to the school operating for families new to the area, including refugee populations. Students of all ages were therefore streamed into four groups: three educational ability groups ranging from 'higher' to 'lower attainers', and 'alternative learning needs'. This school was more transparent in allowing the researcher to approach families from all groups, and data was produced equally across these.

Finally, the influence and prevalence of participants' agendas should also be considered as a potential limitation. The findings could feasibly have been affected by the subjective frustrations and complaints (Edwards, 2005) of particularly the participants categorised as 'mid-level policy actors' (Singh et al., 2013). As well as the exhibition of frustration, participants' own personal relationships with particular styles of intervention (for example, one stakeholder commented '*I hate mindfulness... I hate it... if I want to meditate I'll go on a fell run*'). However, reflecting back over the full data set post-analysis, interviews with these participants also led to more balanced, reflective and self-awareness in narratives, as well as the documentation of their frustrations with a range of public policy-level actors. It however should be noted that all participants' accounts are subjective (Edwards, 2005) and inherently biased in qualitative research traditions.

8.5. Reflections on school-based MHWB provision in Wales

This section reflects on school-based MHWB provision in the Welsh educational context. The development of school-based MHWB policy in Wales is an ongoing and iterative process. Over the course of the construction of this thesis, Welsh Government are continuing to develop the new 'Curriculum for Wales'. The ways in which the 'Area of Learning and Experience' for Health and Wellbeing has been conceptualised is continually in development, with new guidance for schools published in 2019, updated in 2020, providing that:

This Area [Health and Wellbeing] can help learners understand and value how feelings of belonging and connection that come from healthy relationships have a powerful effect on health well-being. Learners need to recognise when relationships are unhealthy and need to be aware of how to keep safe, and seek support for themselves and others. Learners will be encouraged to understand that, throughout their lives, they will experience a range of relationships. They will also be encouraged to develop their abilities to form, nurture and maintain relationships. As a result, they will see how healthy relationships are vital for a healthy body and mind, allowing us to thrive. (Welsh Government, 2020)

This findings of this thesis can be therefore situated against the backdrop of ever-changing discourses around health and wellbeing. Ultimately, the concept of 'wellbeing' can be considered a boundary object (Star, 2010; Star and Griesemer, 1989), and was analysed as such in the empirical data chapters. Where relationships were perhaps less present in policymakers' narratives in Chapter 5, ongoing development suggests these elements are becoming increasingly foregrounded in later iterations of 'what matters' statements and guidance for schools.

This likely means that discourses, conceptualisations and conversations around wellbeing and mental health in schools are not fixed, with governments such as Welsh Government continually reimagining their ideals and approaches to the subject. Wellbeing considered such a 'boundary object' (Star, 2010; Star and Griesemer, 1989) arguably makes the following recommendations of this thesis even more pertinent, particularly the need for policy collaboration and co-production with key stakeholders across educational supra-systems to ensure policy messages are clearly classified and framed (Bernstein, 2000) for schools and other supra-system stakeholders.

8.6. Key recommendations for policy, research and practice in complex adaptive educational systems

This thesis makes a number of central recommendations for policy, research and practice, for the development and implementation of school-based MHWB interventions in Wales, in the UK and internationally. These recommendations follow from the above reflections and unique contributions of the thesis. Keshavarz et al. (2010, p. 1470) in their study leading to calls for primary schools to be considered complex adaptive systems, note that 'although schools exhibit significant contextual differences in their priorities, structure and functioning, external expectations of schools (in terms outcomes achieved) are often very similar. As in the case of diversity, failure to recognise these contextual differences may lead to unrealistic expectations of what schools might achieve'.

The first recommendation is that clear and co-produced policy messages, where various supra-system stakeholders from all levels of provision reflecting contextual

diversity, are more likely to result in the effective development and transmission of these messages, and in turn providing schools with clearer guidance for the most relevant and evidence-based practice. For schools to effectively implement MHWB interventions, there need to be clear recognition and realisation rules (Bernstein, 2000) for all elements of MHWB policy messages, including specific messages regarding best-practice intervention strategy, the definition, measurement and assessment of provision, not just regarding the broad messages relative to the imperative of intervention which were strongest in terms of classification and framing.

Applying the theoretical lens of Greenhalgh and Papousti's (2019) emergent properties of complex adaptive systems within a wider policy messages approach has enabled the thesis to theorise key aetiological contextual factors affecting schools' intervention practices and pupils' subsequent experiences of these. Weare (2015, e7) notes, 'only when the basic education of school staff is strengthened will teachers feel professionalised and empowered enough to deliver specific interventions from a core of real understanding and engagement, be skilled enough to go off-piste and develop their own approaches and/or select wisely from those available and adapt them appropriately to suit their circumstances'. This thesis instead recommends that, possibly before this can be achieved, both clearer and cohesive, as well as contextually-relevant MHWB policy messages are required for schools to more effectively enact governmental approaches, a key focus highlighted by Greenberg et al. (2017). However, data in Chapters 6 and 7 suggest that schools' self-organising practices were creative, '*off-piste*' (Weare, 2015, e7), and led to positive engagement by pupils.

Cohesive system interdependencies are required for more effective development and transmission of messages. In terms of policy development this means better and sustained collaboration and co-production between key stakeholders from all levels of supra-systems, ensuring that productive, not hegemonic, discourse (Foucault, 1972; Cumming et al., 2013) prevails. Furthermore, avoidance of inter-agency discord, with acceptance that 'wellbeing' is a boundary object requiring compromise and collaboration with a range of experiences and perspectives of key players such as 'mid-level policy actors' (Singh et al., 2013) (school collaborators) is likely to be a key facilitator for this process, ensuring that policy messages are effectively

transmitted by school collaborators and enacted by schools. Empirical data show both mid-level actors and key staff within schools (such as Clara and Daniel) are key advocates and drivers for schools in MHWB provision.

Future research into how collaboration with these stakeholders would be best achieved would likely provide insight into how more effective development, transmission and enactment of key MHWB policy messages can occur, with a higher chance of positive experience from pupils' perspectives. Without this collaborative practice that explores how school-based MHWB is conceptualised and how various stakeholders make sense of policies, schools are likely to continue to self-organise due to conceptual confusion (Ecclestone, 2012), conflict (Cigman, 2012) and policy hyperactivity (Clarke, 2012; Dunleavy, 1987).

Prior to this however, future research should identify how genuine co-production mechanisms can be best realised, in order to ensure the voices of stakeholders across educational supra-systems are foregrounded in the future development of school-based MHWB policy messages. This thesis recommends that these mechanisms are built from the 'ground-up', notably, starting with pupils, school staff, key community stakeholders, for example school collaborators, and parents, subsequently identifying the supra-system 'champions' of change and innovation (Bonawitz et al., 2020) at the regional and policy level, to ensure acceptability and contextual-relevance of messages, improving the interdependence (Greenhalgh and Papousti, 2019) between levels of the supra-system.

Future research should also further explore pupils' active roles within MHWB intervention development and evaluation. It should identify key leverage points across a larger number of schools to solidify the initial findings from this small-scale study, and focus on identifying and evaluating multi-agency collaborations between supra-system stakeholders across all levels of provision to develop coherent policy messages for effective enactment, implementation and pupil experience of MHWB interventions at the school level.

The second key recommendation is that future research should focus on the wellbeing of staff in primary schools. Though this research predominantly explored

pupils' engagement and experience of MHWB interventions, and through the interactive interviews, their own relationships with their wellbeing, it is vital to note the importance and relevance of the wellbeing of school staff. Staff wellbeing has been explored within the secondary school setting, and its impacts on the emotional health of students (Kidger et al., 2016; Fisher et al., 2020; Harding et al., 2019), however, limited research has focused on these aspects within primary schools, and was outside the scope of this study. Further research could explore this connection as well as how primary school staff could be best supported in their own wellbeing.

Furthermore, during the interviews with school staff, it became clear that confidence and preparedness to take on the roles of the key intervention agents was very variable. Returning to the findings in Chapter 6, where the two key agents, Daniel and Clara, both self-selected and were selected by their colleagues to take responsibility for much of the schools' emotional work, many of the staff who were not central to this work reflected on their own confidence in the area of pupil MHWB. Future research interested in key mechanisms for effective implementation of school-based MHWB interventions could unpack the contextual conditions, both in the outer and inner setting of provision, that might give rise to or impede the confidence and preparedness of primary school staff in the effective delivery of these interventions.

The third recommendation is that there is potential to extend liminality to the academic spaces within schools. Chapter 2 reflected on the importance of whole-school approaches, which often require substantial systemic change at the school level, for instance the integration of MHWB interventions with existing academic curricula (Weare and Nind, 2011). The findings of this thesis however highlight the complexity of this task. Chapter 8 found one of the leverage points for the positive experience of MHWB interventions was the creation of liminal spaces, which were conceptually and physically separate from schools' practices within academic spaces. The data generated with pupils strongly suggests the benefits that liminality brings, including positive staff-pupil relationships, an environment of trust and support, more agency for pupils to be involved in what happens to them in school, and spaces that de-stigmatise participation in intervention. These benefits may

translate across to academic spaces, and further work should focus on how this task might be achievable.

Currently the existing base in which schools select and deliver interventions creates substantial conceptual confusion and conflict (Ecclestone, 2012; Cigman, 2012) and further contributes to self-organising (recontextualisation) practices (Greenhalgh and Papousti, 2019; Bernstein, 2000) by schools. It is considered that this task is incredibly difficult considering the myriad nature of the intervention 'market' currently available to schools, however this focus is imperative for future research. Empirical data in Chapters 5 and 6 do however suggest a significant barrier to effective development and transmission of messages, notably the complexity and lack of clarity of the intervention evidence base.

Schools have to choose from innumerable, myriad interventions, and it is perhaps no surprise that they often struggle to select contextually-relevant programmes, leading to the process of '*dabbling*' and trialling that was frequently discussed in the empirical data. The fourth recommendation is that further research is also required to provide clear guidance to schools as to the existing evidence base of MHWB interventions, with recommendations as to the effectiveness of interventions available for implementation and evaluation. Further research should explore in what context MHWB interventions have been implemented and should consider other contextual factors as outlined by Pfadenhauer et al. (2017) in their 'Context and Implementation of Complex Interventions' framework.

The fifth key recommendation for policy and practice is as follows. Though clear, co-produced messages are preferable when considering how policy messages can be better developed and transmitted, and thus leading to more effective school intervention practice, pupils' mixed experiences of behaviourist educational approaches to MHWB interventions provide some insight into the development and transmission of MHWB policy messages at the PRC level of supra-systems, and should serve as a cautionary account of an overriding focus on policies developed with individual, behaviour-centric features, especially when 'targeted' at primary school children. Further quantitative and qualitative research should look to explore these factors further, as these findings are only based on a small instrumental case

study that does not claim to be generalisable. Therefore these findings should be considered foundational and in need of further development.

Considering future development of primary school-based MHWB provision, though individual-level strategies such as resilience building were considered important across the data set, and were not just approved by policymakers, it is suggested from the data that for more cohesive inter-dependency across supra-systems, and arguably for more effective development and transmission (strongly-classified and framed messages with clear recognition and realisation rules), a balance between individual-centred and 'settings' approaches is arguably needed. There are a number of approaches currently used within the intervention literature utilising various 'toolkits' for pupils focused on individual and inter-personal-level processes such as social-emotional competence, including the development of confidence, self-esteem and healthy relationships. Returning to the co-production recommendation above, these processes should also seek to identify schools' preferences for individual-level focused interventions and 'toolkits', based on considerations of acceptability and congruence with schools' unique contexts.

8.7. Conclusion

This thesis has offered a unique perspective on school-based MHWB provision using a policy messages, system-focused lens. It has looked to explore key supra-system stakeholders' perspectives on school-based MHWB through focusing on the development, transmission, enactment and experience of MHWB policy messages. In this regard it has looked to connect schools' intervention practices and pupils' experiences of these to aetiological and contextual influences from various domains of a 'supra-system' (Keshavarz et al., 2010) case study in Wales. Despite clear justifications for primary schools intervening in the MHWB of pupils, and although there exist a multitude of interventional approaches looking to achieve this, there arguably still exist system-level barriers to the effective transmission of knowledge, guidance and support from the policy level to the school level.

Empirical data in this thesis ultimately raise questions about how stakeholders involved in developing the effectiveness of interventions aimed at improving the MHWB of children and young people can attend to the current complexities and tensions within supra-systems, and how policy directions from governments to consortia, community intervention partners and schools can be more developed with more contextual-relevance.

Clear, co-produced policy messages taking expertise from a range of relevant supra-system stakeholders, which facilitate the identification of a clear, accessible evidence-base of intervention programmes that schools can utilise, as well as incorporating sufficient flexibility where schools can exercise expertise and agency over ensuring these evidence-based approaches are modifiable for their local context, is crucial. Future research should ultimately explore how this might be best attained.

Appendices

Appendix A: Policy, regional and community stakeholder information sheets and consent forms



Mental health and wellbeing provision in primary schools

Participant information sheet

Background

You are being invited to participate in a research project, funded by Health and Care Research Wales, based at DECIPHer, School of Social Sciences at Cardiff University. This sheet details the aims of the research, and your involvement in the project, if you decide to participate.

Project

We are looking to collaborate with school staff, pupils and key stakeholders in both health and education to find out more about current provisions for mental health and wellbeing in primary schools, exploring how pupils can be involved in university research and school health promotion, and plans for health and wellbeing looking forward to the new Welsh curriculum.

Why have I been invited to participate?

Your organisation has been invited to participate in the study as it operates within the Welsh primary education system. I am inviting a range of national, regional and local authority stakeholders to share their experiences on a range of topics around school health.

Voluntary consent

There is no requirement to take part, and if you do decide you would like to participate, you can withdraw your consent at any point and data can be erased on request.

Confidentiality

The data you provide will be highly confidential. All data arising from the interviews conducted by this project will be anonymised: participants will be given pseudonyms and will **not be identifiable** in the data.

Information will be taken on staff role and basic demographic data, however this will be randomised when the results are produced. A summary report will be provided to schools, however this will not contain any potentially sensitive information such as participant quotes or personal views.

Physical data will be kept in a locked filing cabinet in the research centre office, and digital data will be stored on an encrypted drive on the researcher's university computer, and will not be available to anyone else.

Data will be stored securely and then disposed of in accordance with the Data Protection Act.

Anonymity

All identifiable data will be anonymised and only seen by myself (see contact details below), so please be completely honest with your views. Neither you nor the school will be identifiable during the reporting of the results.

How will data be recorded?

The interviews will be **audio** recorded – this is so I can go back and ensure I report everything you say correctly and that you are represented fully in the findings. Data will be transcribed word for word.

Ethical approval

This project has been ethically approved by Cardiff University School of Social Sciences Research Ethics Committee (application No: 2262).

Contact details

Please find details of the researcher, research centre and university below. If you would like to know more about the study, or if you have any questions in particular, please contact Stephen Jennings at [email address]

If you have any concerns about how the project is being conducted, please contact Cardiff University School of Social Sciences Research Ethics Committee, at socsi-ethics@cardiff.ac.uk.

If you are happy and willing to participate in this project, please sign and date the attached consent form.

Researcher details

Stephen Jennings
[contact details]



Mental health and wellbeing provision in primary schools

Stakeholder interview consent form

I have read and understood the participant information sheet and have had the chance to ask questions about the study *Please initial*

I understand that my participation is entirely voluntary, and that I am able to stop the interview at any time

I consent to the interview being audio recorded for accuracy purposes

I confirm that I am aware that the audio recording and transcript will be used as part of the project and used during the write-up, but that all the information I provide is **confidential and will be anonymised**

I agree to participate in the project

Name _____

Signature _____

Date _____

Organisation _____

Job role _____

Length of time in role _____
_____ years _____ months

Gender _____

Appendix B: School staff information sheets and consent form



Mental health and wellbeing provision in primary schools

Staff Participant information sheet

Background

You are being invited to participate in a research project, funded by Health and Care Research Wales, based at DECIPHER, School of Social Sciences at Cardiff University. This sheet details the aims of the research, and your involvement in the project, if you decide to participate.

Project

This project seeks to work with school staff and pupils, as well as key stakeholders at the national, regional and local levels, to explore current provisions for mental health and wellbeing, focusing on pupils in years 5 and 6 in primary schools.

The study also hopes to identify effective ways in which university research can involve school staff, pupils and parents in the process of developing health programmes.

The project will be running interviews with staff, stakeholders and parents, and workshops with Year 5 and 6 pupils during the 2017-2018 academic year.

Why have I been invited to participate?

Your school has been invited to participate in the study as it is a primary school in [Local Authority redacted]. I am inviting school staff to share their experiences on a range of topics.

Voluntary consent

There is no requirement to take part, and if you do decide you would like to participate, you can withdraw your consent at any point and data can be erased on request.

Confidentiality

The data you provide will be highly confidential. All data arising from the interviews conducted by this project will be anonymised: participants will be given pseudonyms and will **not be identifiable** in the data.

Basic information will be taken about job role, length of time in role and gender, however this will be randomised when the results are produced. A summary report will

be provided to schools, however this will not contain any potentially sensitive information such as participant quotes or personal views.

Physical data will be kept in a locked filing cabinet in the research centre office, and digital data will be stored on an encrypted drive on the researcher's university computer, and will not be available to anyone else.

Data will be stored securely and then disposed of in accordance with the Data Protection Act.

Anonymity

All identifiable data will be anonymised and only seen by myself (see contact details below), so please be completely honest with your views. Neither you nor the school will be identifiable during the reporting of the results.

How will data be recorded?

The interviews will be **audio** recorded – this is so I can go back and ensure I report everything you say correctly and that you are represented fully in the findings. Data will be transcribed word for word.

Ethical approval

This project has been ethically approved by Cardiff University School of Social Sciences Research Ethics Committee (application No: 2262).

Contact details

Please find details of the researcher, research centre and university below. If you would like to know more about the study, or if you have any questions in particular, please contact Stephen Jennings at [email address]

If you have any questions about how the project is being conducted, please contact Cardiff University School of Social Sciences Research Ethics Committee, at socsi-ethics@cardiff.ac.uk.

If you are happy and willing to participate in this project, please sign and date the attached consent form.

Researcher details

Stephen Jennings
[contact details]



Mental health and wellbeing provision in primary schools

Staff interview consent form

Please initial

I have read and understood the participant information sheet and have had the chance to ask questions about the study

I understand that my participation is entirely voluntary, and that I am able to stop the interview at any time

I consent to the interview being audio recorded for accuracy purposes

I confirm that I am aware that the audio recording and transcript will be used as part of the project and used during the write-up, but that all the information I provide is **confidential and will be anonymised**

I agree to participate in the project

Name _____

Signature _____

Date _____

School/organisation _____

Job role _____

Length of time in role _____
_____ years _____ months

Gender _____

Appendix C: Parental opt-in forms (Rangers primary)



Mental health and wellbeing provision in primary schools

Parent/guardian information sheet

Background

Your child's school is being invited to participate in a research project, funded by Health and Care Research Wales, based at DECIPHer, School of Social Sciences at Cardiff University. This sheet details the aims of the research, and your child's involvement in the project, if you are willing for them to participate. There is an attached form, which you will need to sign and return within 21 days, **if you would like them to participate in the study.**

Project

This project seeks to work with school staff and pupils, as well as key stakeholders at the national, regional and local levels to explore current provisions for mental health and wellbeing, focusing on pupils in years 5 and 6 in primary schools.

The study also hopes to identify effective ways in which university research can involve school staff, pupils and parents in the process of developing health programmes.

The project will be running interviews with staff and group interviews with Year 5 and 6 pupils during the 2017-2018 academic year.

Why has my child been invited to participate?

Your child's school has been invited to participate in the study as it is a primary school in Wales. I am inviting a range of school staff and pupils to share their experiences on a range of topics.

Voluntary consent

There is no requirement for your child to take part, and if you are happy for them to participate, you can withdraw their consent at any point and data can be erased on request. Your child will also be asked if they are happy to take part, and they can stop the workshop at any time and for any reason.

Confidentiality

The data your child provides will be highly confidential. All data arising from the focus groups conducted by this project will be anonymised. Participant names will be changed and will **not be identifiable** in the data.

Basic information will also be taken, however this will be randomised when the results are produced. A summary report will be provided to schools, however this will not contain any potentially sensitive information such as participant quotes or personal views.

Physical data will be kept in a locked filing cabinet in the research centre office, and digital data will be stored on an encrypted drive on the researcher's university computer, and will not be available to anyone else.

Data will be stored securely and then disposed of in accordance with the Data Protection Act.

Anonymity

All identifiable data will be anonymised and only seen by myself (see contact details below). Neither your child nor the school will be identifiable during the reporting of the results.

How will data be recorded?

The interviews will be **audio** recorded – this is so I can go back and ensure I report everything you say correctly and that you are represented fully in the findings. Data will be transcribed verbatim.

Ethical approval

This project has been ethically approved by Cardiff University School of Social Sciences Research Ethics Committee (application No: 2262).

Contact details

Please find details of the researcher, research centre and university below. If you would like to know more about the study, or if you have any questions in particular, please contact Stephen Jennings at [email address].

If you have any questions about how the project is being conducted, please contact Cardiff University School of Social Sciences Research Ethics Committee, at socsi-ethics@cardiff.ac.uk. **If you are happy for your child to participate in this project, please sign and date the attached consent form.**

Researcher details

Stephen Jennings
[contact details]



Mental health and wellbeing provision in primary schools
Parent/guardian opt-in form

I have read and understood the participant information sheet and have had the chance to ask questions about the study

Please initial

I confirm that I am happy for my child to take part in the research study

Name _____

Child's name _____

Signature _____

Date _____

School _____

Please return this form within 21 days. Thank you for your co-operation.

If you would like more information about the project, please contact me at the below address, and I will get back to you as soon as possible:

Stephen Jennings
[contact details]

Appendix D: Parental opt-out forms (Holloway primary)



Mental health and wellbeing provision in primary schools Parent/guardian information sheet

Background

Your child's school is being invited to participate in a research project, funded by Health and Care Research Wales, based at DECIPHer, School of Social Sciences at Cardiff University. This sheet details the aims of the research, and your child's involvement in the project, if you are willing for them to participate.. There is an attached form, which you will need to sign and return within 21 days, **if you would not like them to participate in the study**.

Project

This project seeks to work with school staff and pupils, as well as key stakeholders at the national, regional and local levels to explore current provisions for mental health and wellbeing, focusing on pupils in years 5 and 6 in primary schools.

The study also hopes to identify effective ways in which university research can involve school staff, pupils and parents in the process of developing health programmes.

The project will be running interviews with staff and group interviews with Year 5 and 6 pupils during the 2017-2018 academic year.

Why has my child been invited to participate?

Your child's school has been invited to participate in the study as it is a primary school in Wales. I am inviting a range of school staff and pupils to share their experiences on a range of topics.

Voluntary consent

There is no requirement for your child to take part, and if you are happy for them to participate, you can withdraw their consent at any point and data can be erased on request. Your child will also be asked if they are happy to take part, and they can stop the focus group at any time and for any reason.

Confidentiality

The data your child provides will be highly confidential. All data arising from the focus groups conducted by this project will be anonymised. Participant names will be changed and will **not be identifiable** in the data.

Basic information will also be taken, however this will be randomised when the results are produced. A summary report will be provided to schools, however this will not contain any potentially sensitive information such as participant quotes or personal views.

Physical data will be kept in a locked filing cabinet in the research centre office, and digital data will be stored on an encrypted drive on the researcher's university computer, and will not be available to anyone else.

Data will be stored securely and then disposed of in accordance with the Data Protection Act.

Anonymity

All identifiable data will be anonymised and only seen by myself (see contact details below). Neither your child nor the school will be identifiable during the reporting of the results.

How will data be recorded?

The interviews will be **audio** recorded – this is so I can go back and ensure I report everything you say correctly and that you are represented fully in the findings. Data will be transcribed verbatim.

Ethical approval

This project has been ethically approved by Cardiff University School of Social Sciences Research Ethics Committee (application No: 2262).

Contact details

Please find details of the researcher, research centre and university below. If you would like to know more about the study, or if you have any questions in particular, please contact Stephen Jennings at [email address].

If you have any questions about how the project is being conducted, please contact Cardiff University School of Social Sciences Research Ethics Committee, at socsi-ethics@cardiff.ac.uk. **If you would not like your child to participate in this project, please sign and date the attached form. Thank you.**

Researcher details

Stephen Jennings
[contact details]



Mental health and wellbeing provision in primary schools
Parent/guardian **opt-out** form

I confirm that I **would like to opt my child out of** the research study

Please tick

Name _____

Child's name _____

Signature _____

Date _____

School _____

Please return this form within 21 days. Thank you for your co-operation. If you would like more information about the project, please contact me at the below address, and I will get back to you as soon as possible:

Stephen Jennings
[contact details]

Appendix E: Pupil information sheets, assent and interview evaluation forms (Holloway and Rangers)

What will happen after the workshops?

You will be asked to choose a nickname to use for the group, this is what you will be called when I write about the workshops.

When I write about the workshops, all names will be changed – yours and the school's. This is to make sure that everything is private.

Do I have to take part?

You do not have to take part – if you don't want to you can just tell me or the teacher who gave you this leaflet.

If you do, please tell me or the teacher that you want to, and they will tell you when and where the workshop will happen.

What if I have questions?

If you have any questions there will be a chance to ask before the workshop, or at any time during or after the workshop.

Thank you for taking the time to read this leaflet!



Health and wellbeing in primary schools

Information for Year 5s and 6s

Who am I?

Hi! My name is Steve, and I work at Cardiff University. I am currently doing a research project at your school.

What is a research project?

Research projects are where you learn about something new. My project is about pupil experiences of primary school and their health and wellbeing.

What is health and wellbeing?

By wellbeing we mean feeling healthy and happy in your day to day life, and in school.

What am I being asked to do?

We would like you to take part in an activity workshop, this can be with another pupil in your year group or you can do it on your own if you would prefer.

Your teachers and parents have said that it is OK for me to come to your school to talk with you for my project.

In the workshop there are 2 activities.

There are no right or wrong answers, we are interested in your opinions about school and your health and wellbeing, for example what you like and ideas for how things could be improved.

What you say will be really helpful for my university in the future when working with primary schools.

The workshop will last about 30-40 minutes.

Who will know what I say?

The main thing is that what you say or create in the workshop will be private. The school, parents and other friends will not be told any details about your workshop.

Only an LSA present will hear what is said. They are here to make sure that if we are concerned about anyone's safety, the head teacher is told.

I would like to audio record the workshop - this is because I don't want to miss any of your comments. You can be in charge of the recorder.



Health and wellbeing in primary schools

This is an important form, so let's go through it together

I am happy to take part, and know that I can stop at any time, without saying why

Things I say, draw, write or create will be recorded or copied and may be used when the project is written up and shared but **this information will not be linked back to me, and everything is private**

I will be able to keep anything I make and create, but I allow a copy to be made for the project

No one will be told what I say, do or create, except if someone has concerns about my safety. **If this happens, an LSA may have to tell someone**

I am happy to take part in the workshop

The nickname I'd like to choose is:

My real name is _____

The date is _____



Health and wellbeing in primary schools

*Thanks for taking part in the
workshop!*

Thank you very much for taking part in the workshop - it was really interesting to hear about your experiences of school and your health and wellbeing!

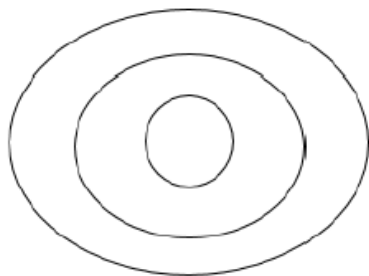
I will be sending back your activity sheets once everyone has taken part.

One more thing that I am really interested in is whether you enjoyed the activities you did during the workshops.

If you would like to, it would be great if you could write one or two things you liked, and one or two things you think could be improved.

Please turn over the page if you would like to let me know what you thought about the activities. Thanks!

Which activity did you like the most?



What did you like about the activities?

Is there anything you would change if you did them again?

Appendix F: Ethical approval form



School of Social Sciences
Ysgol Gwyddorau Cymdeithasol
Head of School, Pennaeth yr Ysgol
Dr Tom Hall

Cardiff University
Glamorgan Building
King Edward VII Avenue
Cardiff CF10 3WT
Wales UK
Tel +44(0)29 2087 5179
Fax +44(0)29 2087 4175
www.cardiff.ac.uk/social-sciences

APPROVAL LETTER

26th April 2017

Our ref: SREC/2262

Stephen John Jennings
PhD Programme
SOCSI

Prifysgol Caerdydd
Adeilad Morgannwg
Rhodfa'r Brenin Edward VII
Caerdydd CF10 3WT
Cymru, Y Deyrnas Unedig
Ffôn +44(0)29 2087 5179
Ffacs +44(0)29 2087 4175
www.caerdydd.ac.uk/social-sciences

Dear Stephen,

Your project entitled '*Co-production of health and wellbeing interventions in primary schools*' has been approved by the School of Social Sciences Research Ethics Committee of Cardiff University and you can now commence the project.

If you make any substantial changes with ethical implications to the project as it progresses you need to inform the SREC about the nature of these changes. Such changes could be: 1) changes in the type of participants recruited (e.g. inclusion of a group of potentially vulnerable participants), 2) changes to questionnaires, interview guides etc. (e.g. including new questions on sensitive issues), 3) changes to the way data are handled (e.g. sharing of non-anonymised data with other researchers).

In addition, if anything occurs in your project from which you think the SREC might usefully learn, then please do share this information with us. All ongoing projects will be monitored and you will be obliged periodically to complete and return a SREC monitoring form. Please inform the SREC when the project has ended. Please use the SREC's project reference number above in any future correspondence.

Yours sincerely



Professor Alan Felstead
Chair of School of Social Sciences Research Ethics Committee

cc: C Perkins
S Murphy
R Evans



Registered Charity, no. 1136855
Elusen Gofrestredig, rhif 1136855

Mental health and wellbeing provision in primary schools

Semi-structured interview topic guide – PRC stakeholders

Introduction

Thank you for agreeing to speak to me today. My name is Stephen Jennings and I am a researcher at Cardiff University.

Aim of the interview

The aim of the interview is to find out more about your experiences as a key stakeholder in school-based mental health and wellbeing provision. We are looking to collaborate with a number of school staff, pupils and stakeholders to find out more about current provisions for mental health and wellbeing in primary schools, the determinants of health for pupils across the various stages of primary education, and exploring how pupils are currently involved in school-based interventions.

Getting started

The interview should take about 40-45 minutes. Your views and experiences are important, and the information you share today will be **confidential**. You will not be identified at any point and what you say is private. If you do not want to or cannot answer a particular question, you do not have to – we can skip onto the next question, **and we can stop the interview at any time**.

The interview will be audio recorded to ensure that what you say is accurately reported. All information, such as your name, the organisation's name and any other names mentioned during the course of the interview will be changed to ensure anonymity. I am now going to switch on the audio recorder and will inform you when I have turned it off.

I know you have already read the study information sheet and signed the consent form, but for the purposes of this recording, please can I check:

- You have read the information sheet and agree to take part in this interview?
- Do you have any questions before we begin?

Introduction

1. Firstly, if you wouldn't mind telling me a bit about your role, your main responsibilities and how long you have been in post?

[priorities/goals – organisation]

- What would you say are your team's main priorities or goals?
 - Have these changed over time, and if so, how?

[priorities/goals – personal]

- How about your personal priorities, interests and goals?

- Again, have these changed over time, and if so, how?

Section 1

2. How is the mental health and wellbeing of pupils in primary schools viewed by your organisation?
3. How would you describe the primary school role in promoting student mental health and wellbeing?

[school responsibilities]

- What do you think are the core responsibilities of primary schools in health promotion?

[factors affecting promotion]

- What do you think are the main factors affecting whether child mental health and wellbeing is focused on or prioritised by schools in you?

Section 2

4. What do you think are the main factors affecting the mental health and wellbeing of students in primary schools in [LA names redacted]?

[priority areas]

- What would you say are the priority areas for child mental health across [LA names redacted]?

[determinants]

- What do you think are the main determinants of child mental health?
 - Which are the most influential?
 - Would you say they differ for younger primary school children compared with older? For example factors affecting KS1 compared with KS2?

Section 3

5. How does your organisation help promote and support student mental health and wellbeing in its network of primary schools?

[services/interventions]

- What services/interventions/programmes does the team offer in schools/communities across [LA names redacted]?

[external agencies]

- Which external agencies do you work with in your work promoting and supporting student mental health and wellbeing?
 - What are your experiences working with these agencies?
 - Advantages and disadvantages?

[integrated/multi-agency approach]

- To what extent would you say current approaches are integrated/multi-agency?

[advice]

- How does your team advise schools/communities on the best approaches for mental and emotional health promotion?

6. How do health initiatives for primary schools come to be introduced and implemented?

[school response]

- How would you say schools/communities respond to the services, programmes and interventions you offer?

[factors affecting acceptability and sustainability]

- What do you think affects whether approaches are taken up by schools/communities?
- How about what affects whether provisions/approaches are sustained and embedded into the school system or community environment?

7. To what extent are pupils actively involved in decision making and health initiatives in primary schools?

8. How would you describe family engagement and involvement in health promotion?

9. Which external agencies are currently involved in promoting and supporting student mental health and wellbeing?

Section 4

10. What do you think are the main strengths and limitations of current approaches to primary school health promotion?

[perceived improvements]

- How do you think current approaches to mental health provision for primary school-aged children could be improved?

[sustainability and acceptability]

- How could they be made more sustainable and acceptable?

11. What might the curriculum review mean for mental health and wellbeing of pupils and staff in primary schools?

12. Do you have any final thoughts? What would you like the research to say in a couple of summary points?

Mental health and wellbeing provision in primary schools

School staff interview topic guide

Introduction

Thank you for agreeing to speak to me today. My name is Stephen Jennings and I am a researcher at Cardiff University.

Aim of the interview

The aim of the interview is to find out more about your experiences as a [member of school staff/ teacher in years 5 and 6] in the area of mental health and wellbeing. We are working with a number of different schools to find out more about current provisions for mental health and wellbeing in primary schools, the determinants of health for pupils in key stage 2, and exploring how pupils can be involved in university research and school health promotion. The project seeks to develop school-centred guidance based on what teachers would like to see happen in the future around health and school improvement.

Getting started

The interview should take about 40-45 minutes. Your views and experiences are important, and the information you share today will be **confidential**. You will not be identified at any point and what you say is private. If you do not want to or cannot answer a particular question, you do not have to – we can skip onto the next question, **and we can stop the interview at any time**.

The interview will be audio recorded to ensure that what you say is accurately reported. All information, such as your name, the school's name and any other names mentioned during the course of the interview will be changed to ensure anonymity. I am now going to switch on the audio recorder and will inform you when I have turned it off.

I know you have already read the study information sheet and signed the consent form, but for the purposes of this recording, please can I check:

- You have read the information sheet and agree to take part in this interview?
- Do you have any questions before we begin?

Section 1

Introduction and background

1. Firstly if you wouldn't mind telling me a bit about your role and how long you have been in post?

[teaching/LSA staff]

- Which year group do you teach/ are you responsible for?
- What are your additional responsibilities alongside teaching?

School role and priorities/ organisational and personal histories

2. How would you describe the role of the school in promoting student health and wellbeing?

[priorities/goals – school]

- What would you say are the school's priorities and goals?
 - Have these changed over time, and if so, how?

[priorities/goals – personal]

- How about your own priorities, goals and interests?
 - Again, have these changed over time, and if so, how?
 - Where would you say mental health and wellbeing fits in with these?

[school responsibility]

- Would you say it is the school's responsibility to promote student health and wellbeing?
 - What are the main responsibilities?

[factors affecting HP]

- What do you think are the main factors affecting whether student health and wellbeing is focused on in your school?

[external expectations]

- What do you think are the expectations of people outside the school regarding promoting student health and wellbeing?
 - How do you feel about these?

Staff views on supporting mental health and wellbeing

3. How do you feel about supporting student mental health and wellbeing as part of your role?

[importance of MH]

- Do you see mental health and wellbeing as an important issue for your school?

[definitions and concepts]

- How would you define mental health and mental illness?

[exposure/experience]

- Have you experienced mental health problems in children at your school? To what extent?

Section 2

Social determinants of health

4. What do you think are the main factors affecting the mental health and wellbeing of students in your [school/ year group]?

[card exercise]

- For instance, previous studies have found various factors to affect student health, a few of these are mentioned on the cards in front of you.
- Can you take a look and pick out a few that you think are important and explain why?
- Are there any other factors that are not mentioned on the cards that you think are important?

[main health issues for schools]

- What would you say are the most important cards and why?
- Do these differ across year groups in your school would you say?

- For example do you think these are relevant across KS1 and KS2 or are they different depending on year group?

Section 3

Current approaches – targeted, universal and whole-school

5. Can you tell me a bit about how your school currently promotes student health and wellbeing?

[targeted approaches]

- What targeted approaches does the school take to health and wellbeing?

[universal approaches]

- How about universal and whole-school approaches, can you give me an example of how this works?

[mental health-specific]

- How does the school promote the mental health of its students?

[prompts for above]

- Can you tell me about the school's policies, curricula and general plans around health and wellbeing?
- Who is/are responsible for the health and wellbeing of students?
 - And mental health?
- Have you had training for promoting health and wellbeing? What have your experiences been?
- Do you work with Healthy Schools [LA name redacted] around student health? If so, how?

6. How would you describe the ethos and environment of the school where health and wellbeing is concerned?

[whole-school approaches]

- How would you describe the relationships within the school?
 - Staff and student relationships?
 - Staff and staff?
 - Staff and outside agencies involved in health promotion?

[pupil involvement]

- To what extent are pupils actively involved in decision making and health initiatives in schools?
 - How are pupils involved? Does the school use pupil voice and school council?
 - Are rules and policies developed collaboratively with pupils for instance?
 - Can you provide an example of how these initiatives work?
 - Would you say these are effective in your opinion? For example would you say students respond well to these?

[family involvement]

- How would you describe family engagement and involvement in health promotion?
 - How would you describe the community that supports the school?

[external agencies]

- Which external agencies are currently involved in promoting and supporting student mental health and wellbeing?
 - Healthy Schools?

[communication]

- How would you describe the communication within the school regarding student mental health and wellbeing?
 - How about between your school and external support?
- What are the barriers and facilitators to effective communication?

Systems – introduction, path dependence, feedback loops, acceptability/sustainability

7. How do health initiatives and programmes come to be introduced and implemented in your school?

[system introduction of initiative]

- Who decides on whether an approach is taken forward?
- How are approaches selected/ evaluated?
- Can you give me an example of a health programme has been selected and implemented across the school?

[system response]

- How would you say staff have responded to health programmes?

[factors affecting acceptability and sustainability]

- What do you think affects whether health programmes are taken up in school?
- How about what affects whether these programmes are sustained and introduced into the school system?

[self-evaluation and data]

- Do you know if selected programmes are evidence-based or have been evaluated?
 - Does the school use any self-evaluation measures or data for improving student health? Can you give me an example?

[support and advice on HP]

- How would you describe the support and advice from external agencies (e.g. Healthy Schools) regarding health programmes?

Strengths and limitations of current approaches

8. What are your views on the current health initiatives taking place in your school?

[positives and negatives/ perceived solutions]

- What works well?
- What do you think could be improved?
 - How would you go about this?
- Do you have any concerns about supporting student mental health and wellbeing as a member of staff?
 - What are the main ones?

[resources, skills, knowledge and support]

- Would you say you feel comfortable/equipped with the right resources, skills or knowledge to help promote student health and wellbeing?
 - What resources, skills or knowledge do you require when supporting student health?
 - Do you feel supported by the school/LA?
 - How about in your own health and wellbeing?

Solutions

9. How do you think current approaches in your school towards mental health and wellbeing could be improved?

[sustainability and acceptability]

- How could they be made more acceptable and sustainable?

Summary

10. To summarise, what do you think are the most important things that are being done and the most important things that need to change in your opinion?

11. Do you have any final thoughts?

- What would you like the research to say in a couple of summary points?

Pupil Interview Guide

Icebreaker

One thing you like/ one fact/ one thing you like doing outside school

Activity 1 - Brain mapping - biological/psychological-level determinants

I'd like to find out a bit about what makes you feel both happy and healthy. On the piece of paper in front of you I have an outline of a brain. On this paper I'd like to know your thoughts about what you think are the most important things which help you feel happy and healthy. You can put the cards that make you feel happy and the cards that make you feel healthy on opposite sides of the brain, or put them all together – it's your choice.

Here are some stickers which you can use for some ideas if you're not sure what to start with. Peel any stickers off that you think are important and stick them on the brain.

There are blank cards here for any ideas you have which aren't on the cards already – you can use as many or as few as you like.

The main question is: What are the most important things that make you feel healthy and happy?

Activity 2 - Guidance for circle map – social determinants of health

Next I'd like to find out your thoughts on how school can help you feel healthy and happy. For this activity I have a sheet with several circles on it – the smallest circle is you – you can draw yourself or write something in the circle about yourself if you like, or just write your nickname. The smaller circles are for things that are most important to you, and the larger circles are things that are important but not as much as the things closer to the centre.

Again, I have some stickers here that you can use if you need some ideas.

Alternatively, you can draw your own map and draw and write on it using your own ideas. There will be the chance to use some creative methods in the second half of the workshop.

There are blank stickers here for any ideas you have which aren't on the cards already – you can use as many or as few as you like.

The main question is: What are the most important things to you in school that make you feel healthy and happy?

Prompt Questions

What are your experiences in school?

What do you enjoy doing in school?

What makes you feel healthy?

What makes you feel happy?

What does the school do to help you feel happy and healthy? Does this help?

Is there anything else you would like the school to do?

What could help you feel healthier and happier?

Are you involved in what happens in school?

Is there anything not on the stickers that you think is important?

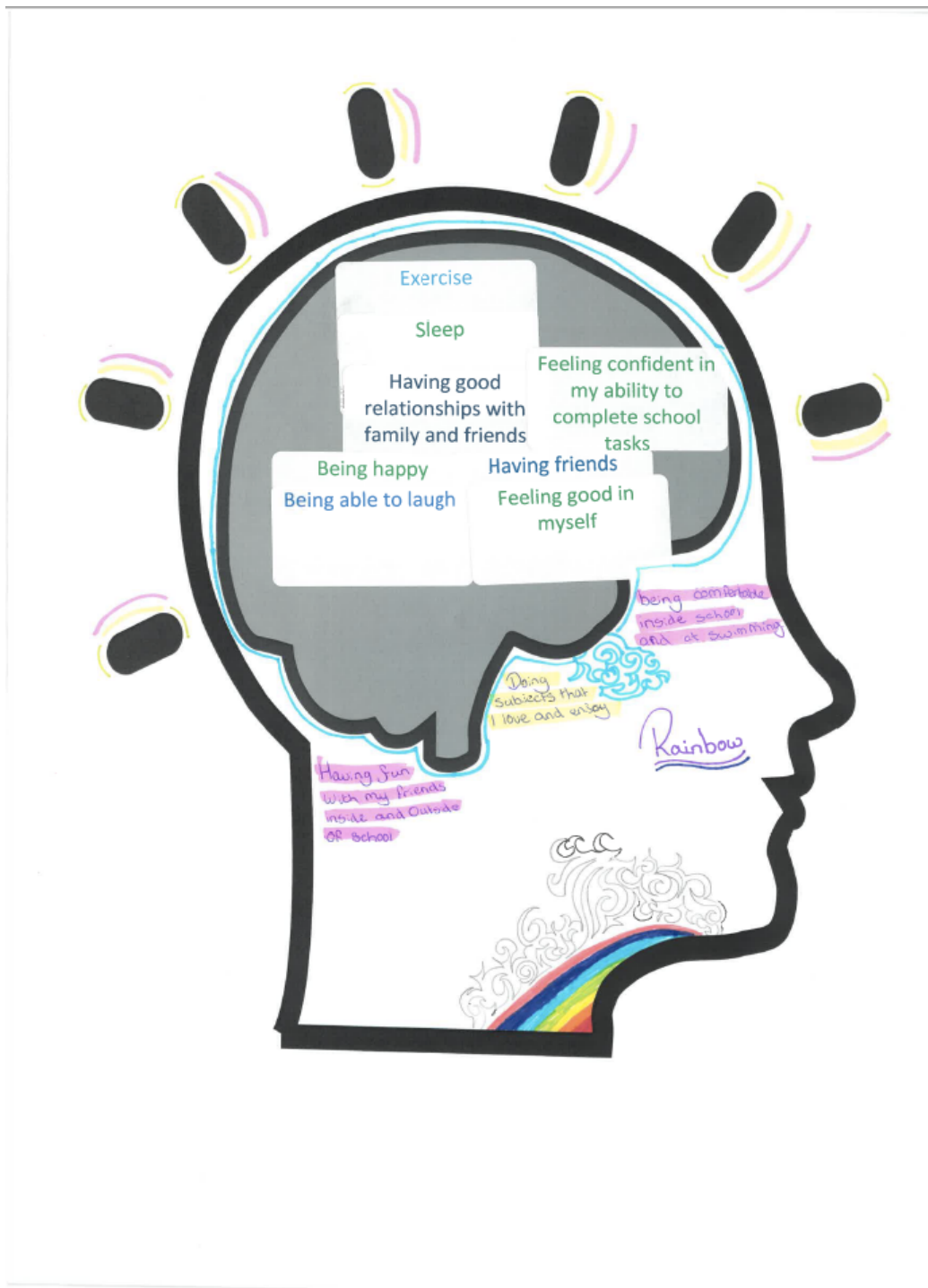
How did you find the activities? What did you enjoy? Is there anything that you might change if you did this again?

Appendix H: Coding tree

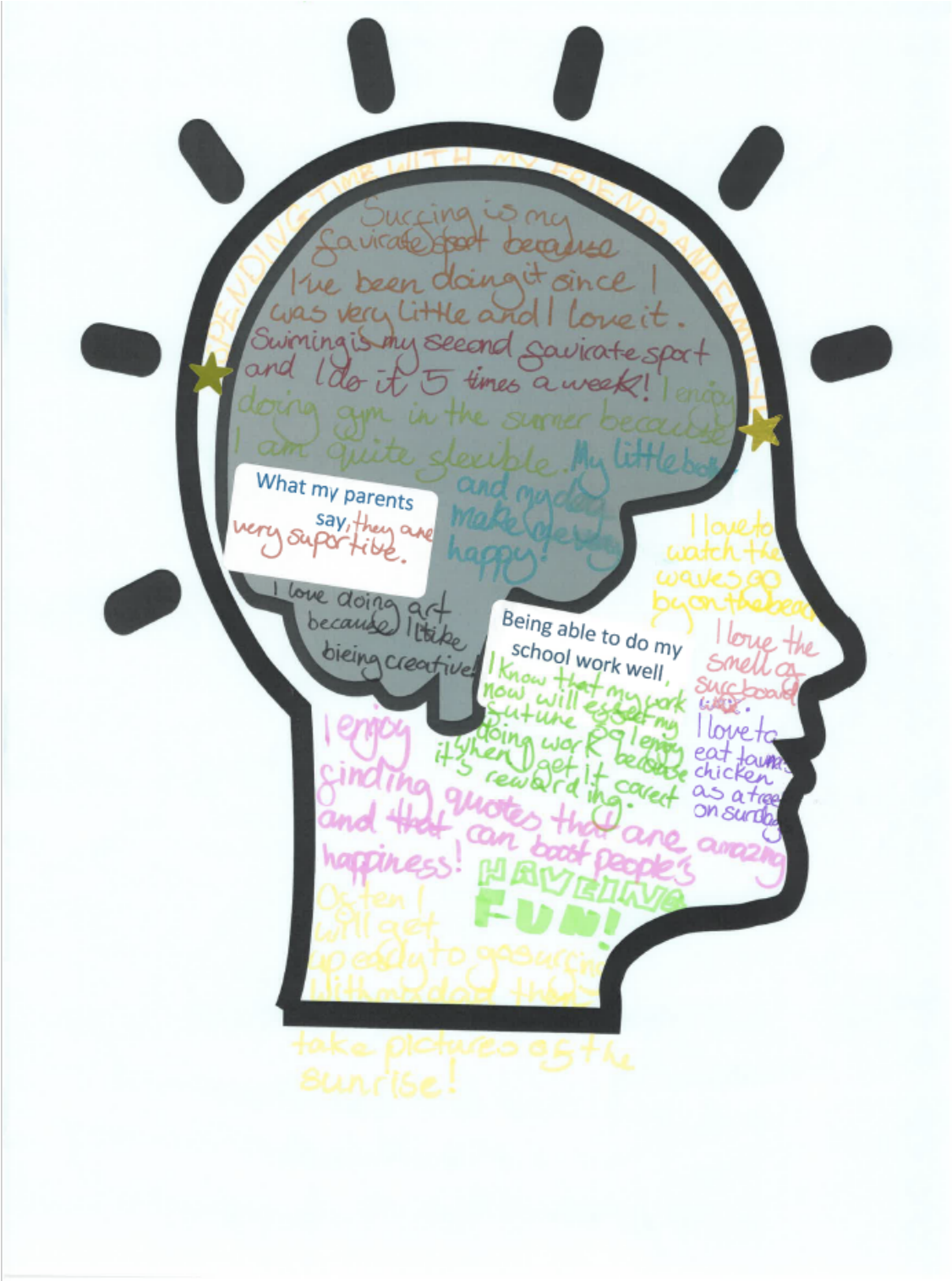
<p>Appraising interventions</p> <ul style="list-style-type: none"> - Justification for intervention <ul style="list-style-type: none"> o Moral o Legal o Ethical o Educational/academic attainment - Obligatory choice - Responsibility for provision - Behavioural strategies - Acceptability and sustainability - Intervention strategy and assessment <ul style="list-style-type: none"> o Individualisation/'fixing' o Environmental focused approaches o 'assessment, assessment, assessment' 	<p>Inter-agency working at PRC levels</p> <ul style="list-style-type: none"> - Collaboration - Perceptions of external agencies <ul style="list-style-type: none"> o Estyn o Welsh Government o Educational Consortia - Systemic barriers - Weak interdependencies <ul style="list-style-type: none"> o Conceptual confusion o Subjectivities of policy - Sensemaking processes <ul style="list-style-type: none"> o Policy hyperactivity
<p>School interventions</p> <ul style="list-style-type: none"> - ELSA - Helping Hand - Mile a Day - Nurture - 'Cwtch' rooms - Wellbeing wall - Behaviourism and sensemaking - Recontextualisation <ul style="list-style-type: none"> o Sensemaking and self-organisation o Contextual fit – acceptance and rejection of policy messages 	<p>Outer setting of support</p> <ul style="list-style-type: none"> - Supporting schools - Evidence-based approaches - Signposting and recommending providers - Personal and professional priorities
<p>Leverage points</p> <ul style="list-style-type: none"> - Early intervention and prevention - Staff-student relationships - Inter-staff relationships - Pupil involvement - Key intervention agents <ul style="list-style-type: none"> o Staff understanding and empathy o Positionality and affective events - Privacy 	

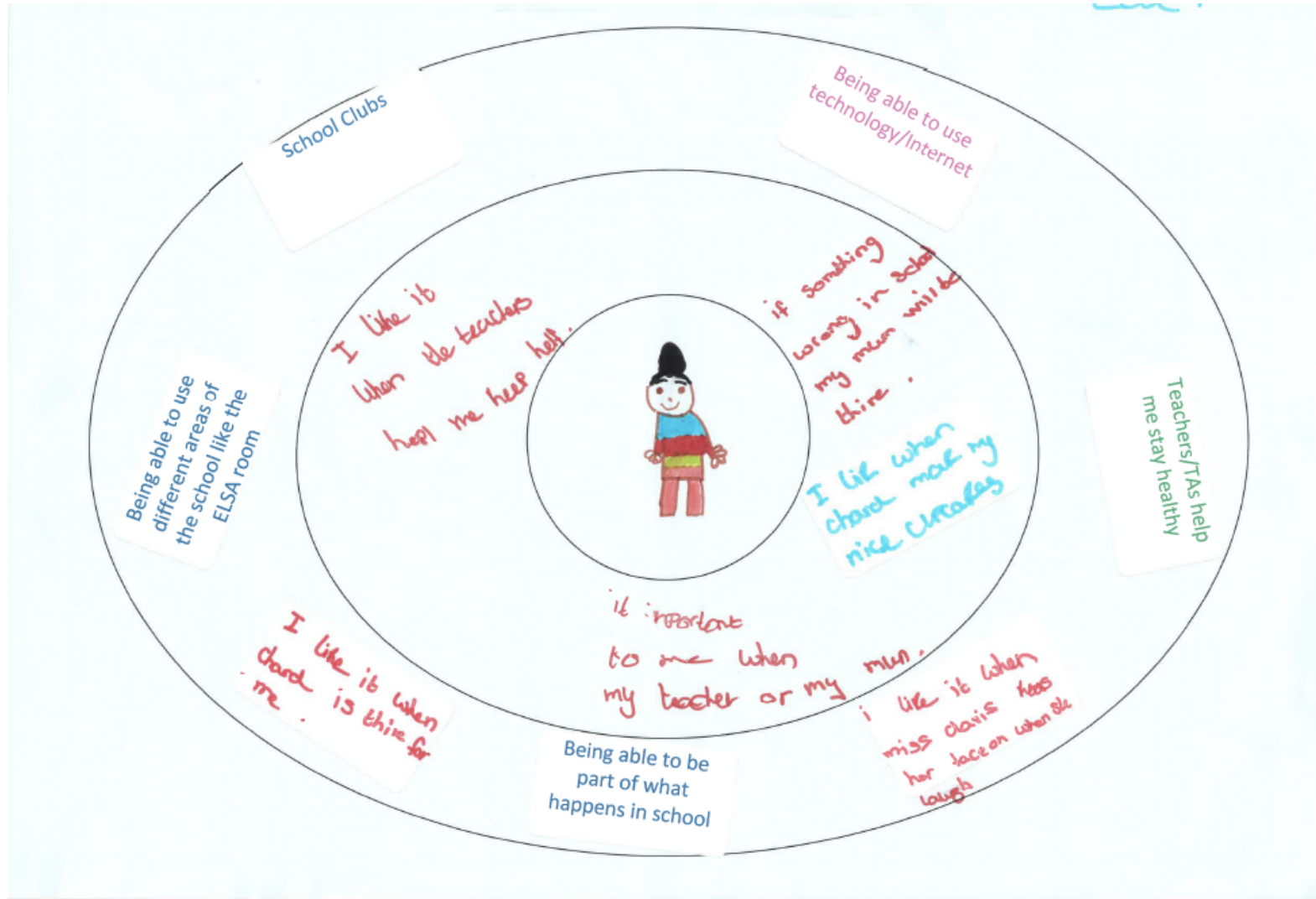
<ul style="list-style-type: none">- Sustainability- Re-imagination of emotional spaces<ul style="list-style-type: none">o De-stigmatisationo De-formalisationo Pupil ownership of spaceo Liminality	
---	--

Appendix I: Examples of interactive interview activities: brain mapping¹³ and circle ranking



¹³ Copyright Clipartbest 2020 ©







Appendix J: Examples of literature review searches

1. "systematic review" OR "literature review" OR "meta-analys*" OR "review" OR "evidence") AND ("mental health" OR "wellbein*") AND "primary school*") AND ((context)) AND (problems) AND (LIMIT-TO (AFFILCOUNTRY , "United Kingdom")) AND (LIMIT-TO (DOCTYPE , "re") OR LIMIT-TO (DOCTYPE , "ar"))
2. "child mental health") AND ("primary school*" OR "primary education") AND (intervention)
3. ("mental health" OR "child mental health") OR (well-being OR wellbeing) AND ("primary school*" OR "primary education") AND (intervention)
4. ("mental health") AND (well-being OR wellbeing) AND ("primary school*" OR "primary education") AND (intervention)
5. ("complex adaptive systems" OR "complex systems") AND ("systems theory" OR "complexity theory" OR "complexity science")
6. ("complexity science" OR "complexity theory" AND "school")
7. ("mental health" OR "wellbeing" OR "social and emotional learning" OR "social intelligence" OR "emotional intelligence" AND "intervention" OR "program*")) AND ("primary school*" OR "elementary school*")

Appendix K: Transcription Key

[...]	Long pause
[bold and italics]	Inserted by the researcher to contextualise subject participant was discussing
...	Short pause
()	To denote non-verbal input from participant, i.e. laughing
[<i>italics</i>]	Current participant interrupts previous participant

Bibliography

- Adams, W.C., 2015. Conducting semi-structured interviews, in: Handbook of Practical Program Evaluation. Wiley, Hoboken, NJ.
- Adler, P.A., Adler, P., 1987. Membership Roles in Field Research. SAGE, California.
- Allen, G., 2011. Early intervention: the next steps. Cabinet Office and Department for Work and Pensions.
- Alshenqeeti, H., 2014. Interviewing as a Data Collection Method: A Critical Review. *Engl. Linguist. Res.* 3. <https://doi.org/10.5430/elr.v3n1p39>
- Anderson, P., 1999. Complexity Theory and Organization Science. *Organ. Sci.* 10, 216–232.
- Anderson, R., Crabtree, B.F., Steele, D.J., McDaniel, R.R., 2005. Case study research: The view from complexity science. *Qual. Health Res.* 15, 669–685. <https://doi.org/10.1177/1049732305275208>
- Atkinson, P., 2015. For Ethnography. SAGE Publications.
- Atkinson, S., Robson, M., 2012. Arts and health as a practice of liminality: Managing the spaces of transformation for social and emotional wellbeing with primary school children. *Health Place* 18, 1348–1355. <https://doi.org/10.1016/j.healthplace.2012.06.017>
- Ball, S.J., 1994. Education Reform. McGraw-Hill Education (UK).
- Ball, S.J., Maguire, M., Braun, A., 2011. How Schools Do Policy: Policy Enactments in Secondary Schools. Routledge.
- Banks, J.A., 1996. Multicultural Education, Transformative Knowledge and Action: Historical and Contemporary Perspectives. Teachers College Press.
- Barbour, R.S., 1998. Mixing Qualitative Methods: Quality Assurance or Qualitative Quagmire? *Qual. Health Res.* 8, 352–361. <https://doi.org/10.1177/104973239800800306>
- Baruch, G., 2001. Mental health services in schools: the challenge of locating a psychotherapy service for troubled adolescent pupils in mainstream and special schools. *J. Adolesc.* 24, 549–570. <https://doi.org/10.1006/jado.2001.0389>
- Bedford, L.E., 2015. Supporting a co-production approach to improving health: The role of health psychology. *Health Psychol. Update* 24.
- Bennett, T., Savage, M., Silva, E.B., Warde, A., Gayo-Cal, M., Wright, D., 2009. Culture, Class, Distinction. Routledge.
- Bernstein, B., 2000. Pedagogy, Symbolic Control, and Identity: Theory, Research, Critique. Rowman & Littlefield.
- Bernstein, B., 1975. Class, Codes and Control. Routledge, London.
- Berry, V., Axford, N., Blower, S., Taylor, R.S., Edwards, R.T., Tobin, K., Jones, C., Bywater, T., 2016. The Effectiveness and Micro-costing Analysis of a Universal, School-Based, Social–Emotional Learning Programme in the UK: A Cluster-Randomised Controlled Trial. *School Ment. Health* 8, 238–256. <https://doi.org/10.1007/s12310-015-9160-1>
- Bhaskar, R., 1998. Philosophy and Scientific Realism, in: Archer, M.S. (Ed.), *Critical Realism: Essential Readings*. Routledge, pp. 16–47.
- Bhaskar, R., 1989. Reclaiming Reality: A Critical Introduction to Contemporary Philosophy. Taylor & Francis.
- Bhaskar, R., 1975. A Realist Theory of Science. Routledge.
- Bonawitz, K., Wetmore, M., Heisler, M., Dalton, V.K., Damschroder, L.J., Forman, J., Allan, K.R., Moniz, M.H., 2020. Champions in context: which attributes matter

- for change efforts in healthcare? *Implement. Sci.* 15, 62.
<https://doi.org/10.1186/s13012-020-01024-9>
- Bonell, C., Fletcher, A., Fitzgerald-Yau, N., Hale, D., Allen, E., Elbourne, D., Jones, R., Bond, L., Wiggins, M., Miners, A., Legood, R., Scott, S., Christie, D., Viner, R., 2015. Initiating change locally in bullying and aggression through the school environment (INCLUSIVE): a pilot randomised controlled trial. NIHR Journals Library.
- Bonell, C., Fletcher, A., Morton, M., Lorenc, T., Moore, L., 2012. Realist randomised controlled trials: a new approach to evaluating complex public health interventions. *Soc. Sci. Med.* 1982 75, 2299–2306.
<https://doi.org/10.1016/j.socscimed.2012.08.032>
- Bradshaw, C.P., Sawyer, A.L., O'Brennan, L.M., 2009. A Social Disorganization Perspective on Bullying-Related Attitudes and Behaviors: The Influence of School Context. *Am. J. Community Psychol.* 43, 204–220.
<https://doi.org/10.1007/s10464-009-9240-1>
- Brännlund, A., Strandh, M., Nilsson, K., 2017. Mental-health and educational achievement: the link between poor mental-health and upper secondary school completion and grades. *J Ment Health* 26, 318–325.
- Braun, A., Ball, S.J., Maguire, M., Hoskins, K., 2011. Taking context seriously: towards explaining policy enactments in the secondary school. *Discourse Stud. Cult. Polit. Educ.* 32, 585–596.
<https://doi.org/10.1080/01596306.2011.601555>
- Braun, A., Maguire, M., Ball, S.J., 2010. Policy enactments in the UK secondary school: examining policy, practice and school positioning. *J. Educ. Policy* 25, 547–560. <https://doi.org/10.1080/02680931003698544>
- Braun, A., Maguire, M., 2020. Doing without believing – enacting policy in the English primary school. *Crit. Stud. Educ.* 61, 433–447.
<https://doi.org/10.1080/17508487.2018.1500384>
- Braun, V., Clarke, V., 2019. Reflecting on reflexive thematic analysis. *Qual. Res. Sport Exerc. Health* 11, 589–597.
<https://doi.org/10.1080/2159676X.2019.1628806>
- Braun, V., Clarke, V., 2006. Using thematic analysis in psychology. *Qual. Res. Psychol.* 3, 77–101. <https://doi.org/10.1191/1478088706qp063oa>
- Breedvelt, J.J.F., Zamperoni, V., South, E., Uphoff, E.P., Gilbody, S., Bockting, C.L.H., Churchill, R., Kousoulis, A.A., 2020. A systematic review of mental health measurement scales for evaluating the effects of mental health prevention interventions. *Eur. J. Public Health* 30, 539–545.
<https://doi.org/10.1093/eurpub/ckz233>
- Brown, C., Carr, S., 2019. Education Policy and mental weakness: a response to a mental health crisis. *J. Educ. Policy* 34, 242–266.
<https://doi.org/10.1080/02680939.2018.1445293>
- Brunila, K., Rynänen, S., 2017. New rules of the game: youth training in Brazil and Finland as examples of the new global network governance. *J. Educ. Work* 30, 353–366. <https://doi.org/10.1080/13639080.2016.1191627>
- Bruns, E.J., Parker, E.M., Hensley, S., Pullmann, M.D., Benjamin, P.H., Lyon, A.R., Hoagwood, K.E., 2019. The role of the outer setting in implementation: associations between state demographic, fiscal, and policy factors and use of evidence-based treatments in mental healthcare. *Implement. Sci.* 14, 96.
<https://doi.org/10.1186/s13012-019-0944-9>

- Burns, E., Fenwick, J., Schmied, V., Sheehan, A., 2012. Reflexivity in midwifery research: The insider/outsider debate. *Midwifery* 28, 52–60.
<https://doi.org/10.1016/j.midw.2010.10.018>
- Calear, A.L., Christensen, H., 2010a. Review of internet-based prevention and treatment programs for anxiety and depression in children and adolescents. *Med. J. Aust.* 192, S12-14.
- Calear, A.L., Christensen, H., 2010b. Systematic review of school-based prevention and early intervention programs for depression. *J. Adolesc.* 33, 429–438.
<https://doi.org/10.1016/j.adolescence.2009.07.004>
- Cantone, E., Piras, A.P., Vellante, M., Preti, A., Daniélsdóttir, S., D'Aloja, E., Lesinskiene, S., Angermeyer, M.C., Carta, M.G., Bhugra, D., 2015. Interventions on Bullying and Cyberbullying in Schools: A Systematic Review. *Clin. Pract. Epidemiol. Ment. Health CP EMH* 11, 58–76.
<https://doi.org/10.2174/1745017901511010058>
- Chalfen, R., 2011. Differentiating Practices of Participatory Visual Media Production, in: *The SAGE Handbook of Visual Research Methods*. SAGE, London.
- Cheney, G., Schlösser, A., Nash, P., Glover, L., 2014. Targeted group-based interventions in schools to promote emotional well-being: a systematic review. *Clin. Child Psychol. Psychiatry* 19, 412–438.
<https://doi.org/10.1177/1359104513489565>
- Cigman, R., 2012. We need to talk about well-being. *Res. Pap. Educ.* 27, 449–462.
<https://doi.org/10.1080/02671522.2012.690238>
- Clark, A., Moss, P., 2001. Listening to young children: the Mosaic approach. National Children's Bureau for the Joseph Rowntree Foundation, London.
- Clarke, M., 2012. *Lacan and Education Policy: The Other Side of Education*. Bloomsbury Publishing.
- Coburn, C.E., 2005. Shaping Teacher Sensemaking: School Leaders and the Enactment of Reading Policy. *Educ. Policy* 19, 476–509.
<https://doi.org/10.1177/0895904805276143>
- Collier, A., 1994. *Critical Realism: An Introduction to Roy Bhaskar's Philosophy*. Verso.
- Collishaw, S., Maughan, B., Goodman, R., Pickles, A., 2004. Time trends in adolescent mental health. *J. Child Psychol. Psychiatry* 45, 1350–1362.
<https://doi.org/10.1111/j.1469-7610.2004.00842.x>
- Corcoran, R.P., Cheung, A.C.K., Kim, E., Xie, C., 2018. Effective universal school-based social and emotional learning programs for improving academic achievement: A systematic review and meta-analysis of 50 years of research. *Educ. Res. Rev.* 25, 56–72. <https://doi.org/10.1016/j.edurev.2017.12.001>
- Corrieri, S., Heider, D., Conrad, I., Blume, A., König, H.-H., Riedel-Heller, S.G., 2014. School-based prevention programs for depression and anxiety in adolescence: a systematic review. *Health Promot. Int.* 29, 427–441.
<https://doi.org/10.1093/heapro/dat001>
- Corzaro, W.A., 2003. *We're Friends, Right?: Inside Kids' Culture*. Joseph Henry Press. <https://doi.org/10.17226/10723>
- Cowan, R.J., Sheridan, S.M., 2003. Investigating the Acceptability of Behavioral Interventions in Applied Conjoint Behavioral Consultation: Moving from Analog Conditions to Naturalistic Settings. *Sch. Psychol. Q.* 18, 1–21.
- Crabtree, B.F., Miller, W.L., Stange, K.C., 2001. Understanding Practice From the Ground Up. *J. Fam. Pract.* 50.

- Craig, P., Di Ruggiero, E., Frohlich, K.L., Mykhalovskiy, E., White, M., Campbell, R., Cummins, S., Edwards, N., Hunt, K., Kee, F., Loppie, C., Moore, L., Ogilvie, D., Petticrew, M., Poland, B., Ridde, V., Shoveller, J., Viehbeck, S., Wight, D., 2018. Taking account of context in population health intervention research: guidance for producers, users and funders of research [WWW Document]. NIHR J. Libr. URL <https://www.journalslibrary.nihr.ac.uk/nihr-research/canadian-institutes-of-health-research-cihr-and-nihr-collaboration.htm> (accessed 7.28.20).
- Craig, P., Dieppe, P., Macintyre, S., Michie, S., Nazareth, I., Petticrew, M., 2008. Developing and evaluating complex interventions: the new Medical Research Council guidance. *BMJ* 337. <https://doi.org/10.1136/bmj.a1655>
- Crean, H.F., Johnson, D.B., 2013. Promoting Alternative Thinking Strategies (PATHS) and elementary school aged children's aggression: results from a cluster randomized trial. *Am. J. Community Psychol.* 52, 56–72. <https://doi.org/10.1007/s10464-013-9576-4>
- Crowe, S., Cresswell, K., Robertson, A., Huby, G., Avery, A., Sheikh, A., 2011. The case study approach. *BMC Med. Res. Methodol.* 11, 100. <https://doi.org/10.1186/1471-2288-11-100>
- Cumming, T., Sumsion, J., Wong, S., 2013. Reading between the lines: An interpretative meta-analysis of ways early childhood educators negotiate discourses and subjectivities informing practice. *Contemp. Issues Early Child.* 14, 223–240. <https://doi.org/10.2304/ciec.2013.14.3.223>
- Dahlberg, G., Moss, P., Pence, A.R., 2007. *Beyond Quality in Early Childhood Education and Care: Languages of Evaluation*, 2nd ed. Routledge, Abingdon.
- Daivadanam, M., Ingram, M., Annerstedt, K.S., Parker, G., Bobrow, K., Dolovich, L., Gould, G., Riddell, M., Vedanthan, R., Webster, J., Absetz, P., Alvensson, H.M., Androutsos, O., Chavannes, N., Cortez, B., Devarasetty, P., Fottrell, E., Gonzalez-Salazar, F., Goudge, J., Herasme, O., Jennings, H., Kapoor, D., Kamano, J., Kasteleyn, M.J., Kyriakos, C., Manios, Y., Mogulluru, K., Owolabi, M., Lazo-Porras, M., Silva, W., Thrift, A., Uvere, E., Webster, R., Kleij, R. van der, Olmen, J. van, Vardavas, C., Zhang, P., Group, on behalf of the G.C. and C. working, 2019. The role of context in implementation research for non-communicable diseases: Answering the 'how-to' dilemma. *PLOS ONE* 14, e0214454. <https://doi.org/10.1371/journal.pone.0214454>
- Damschroder, L.J., Aron, D.C., Keith, R.E., Kirsh, S.R., Alexander, J.A., Lowery, J.C., 2009. Fostering implementation of health services research findings into practice: a consolidated framework for advancing implementation science. *Implement. Sci.* 4, 50. <https://doi.org/10.1186/1748-5908-4-50>
- Davies, S.C., 2014. Annual Report of the Chief Medical Officer, 2013. Public Mental Health Priorities: Investing in the Evidence.
- Denny, E., 2009. I never know from one day to another how I will feel: pain and uncertainty in women with endometriosis. *Qual. Health Res.* 19, 985–995. <https://doi.org/10.1177/1049732309338725>
- Department for Education, 2018. *Mental Health and Behaviour in Schools*.
- Dix, K.L., Slee, P.T., Lawson, M.J., Keeves, J.P., 2012. Implementation quality of whole-school mental health promotion and students' academic performance. *Child Adolesc. Ment. Health* 17, 45–51. <https://doi.org/10.1111/j.1475-3588.2011.00608.x>
- Domitrovich, C.E., Cortes, R.C., Greenberg, M.T., 2007. Improving young children's social and emotional competence: a randomized trial of the preschool

- “PATHS” curriculum. *J. Prim. Prev.* 28, 67–91. <https://doi.org/10.1007/s10935-007-0081-0>
- Donaldson, G., 2015. *Successful Futures: Independent Review of Curriculum and Assessment Arrangements in Wales*. Open Government Licence/ Crown Copyright.
- Dowling, M., 2006. Approaches to reflexivity in qualitative research. *Nurse Res.* 13, 7–21. <https://doi.org/10.7748/nr2006.04.13.3.7.c5975>
- Downey, C., Williams, C., 2009. Seeing eye-to-eye: evaluation of Family SEAL, a school-home learning partnership. Presented at the 22nd International Congress for School Effectiveness and Improvement (ICSEI 2009) (04/01/09 - 07/01/09).
- Dray, J., Bowman, J., Campbell, E., Freund, M., Wolfenden, L., Hodder, R.K., McElwaine, K., Tremain, D., Bartlem, K., Bailey, J., Small, T., Palazzi, K., Oldmeadow, C., Wiggers, J., 2017. Systematic Review of Universal Resilience-Focused Interventions Targeting Child and Adolescent Mental Health in the School Setting. *J. Am. Acad. Child Adolesc. Psychiatry* 56, 813–824. <https://doi.org/10.1016/j.jaac.2017.07.780>
- Dunleavy, P., 1987. *Theories of the State: The Politics of Liberal Democracy*. Macmillan Education, Basingstoke.
- Durlak, J.A., Weissberg, R.P., Dymnicki, A.B., Taylor, R.D., Schellinger, K.B., 2011. The impact of enhancing students’ social and emotional learning: a meta-analysis of school-based universal interventions. *Child Dev.* 82, 405–432. <https://doi.org/10.1111/j.1467-8624.2010.01564.x>
- Dvorsky, M., Girio-Herrera, E., Owens, J., Weist, M., Lever, N.A., Bradshaw, C.P., 2014. School-based screening for mental health in early childhood. *Handb. Sch. Ment. Health Res. Train. Pract. Policy* 297–310.
- Ecclestone, K., 2012. From emotional and psychological well-being to character education: challenging policy discourses of behavioural science and ‘vulnerability.’ *Res. Pap. Educ.* 27, 463–480. <https://doi.org/10.1080/02671522.2012.690241>
- Edwards, D., 2005. Moaning, whinging and laughing: the subjective side of complaints. *Discourse Stud.* <https://doi.org/10.1177/1461445605048765>
- Ellis, J., Band, R., Kinsella, K., Cheetham-Blake, T., James, E., Ewings, S., Rogers, A., 2020. Optimising and profiling pre-implementation contexts to create and implement a public health network intervention for tackling loneliness. *Implement. Sci.* 15, 35. <https://doi.org/10.1186/s13012-020-00997-x>
- Emmel, N., Clark, A., 2011. Learning to Use Visual Methodologies in Our Research: A Dialogue Between Two Researchers. *Forum Qual. Sozialforschung Forum Qual. Soc. Res.* 12. <https://doi.org/10.17169/fqs-12.1.1508>
- Estyn, 2017. *Common Inspection Framework from September 2017*.
- European Union, 2018. *General Data Protection Regulation (GDPR)*, 2016/679.
- Evans, R., Murphy, S., Scourfield, J., 2015. Implementation of a School-Based Social and Emotional Learning Intervention: Understanding Diffusion Processes Within Complex Systems. *Prev. Sci.* 16, 754–764. <https://doi.org/10.1007/s11121-015-0552-0>
- Evans, R.E., Craig, P., Hoddinott, P., Littlecott, H., Moore, L., Murphy, S., O’Cathain, A., Pfadenhauer, L., Rehfuss, E., Segrott, J., Moore, G., 2019. When and how do ‘effective’ interventions need to be adapted and/or re-evaluated in new contexts? The need for guidance. *J Epidemiol Community Health* 73, 481–482. <https://doi.org/10.1136/jech-2018-210840>

- Fazel, M., Hoagwood, K., Stephan, S., Ford, T., 2014. Mental health interventions in schools 1. *Lancet Psychiatry* 1, 377–387. [https://doi.org/10.1016/S2215-0366\(14\)70312-8](https://doi.org/10.1016/S2215-0366(14)70312-8)
- Fecho, B., 2011. *Writing in the Dialogical Classroom: Students and Teachers Responding to the Texts of Their Lives*. Principles in Practice.
- Fine, G.A., Sandstrom, K., 1988. *Knowing Children: Participant Observation Among Minors*. SAGE, US.
- Fisher, H., Harding, S.K., Bell, S.L., Copeland, L., Evans, R., Powell, J.M., Araya, R., Campbell, R.M., Ford, T., Gunnell, D.J., Murphy, S., Kidger, J.L., 2020. Delivery of a Mental Health First Aid training package and staff peer support service in secondary schools: a process evaluation of uptake and fidelity of the WISE intervention: A process evaluation of uptake and fidelity of the WISE intervention. *Trials* 21, 745 (2020). <https://doi.org/10.1186/s13063-020-04682-8>
- Fletcher, A.J., 2017. Applying critical realism in qualitative research: methodology meets method. *Int. J. Soc. Res. Methodol.* 20, 181–194. <https://doi.org/10.1080/13645579.2016.1144401>
- Fontana, J.S., 2004. A Methodology for Critical Science in Nursing. *Adv. Nurs. Sci.* 27, 93–101.
- Ford, T., Hamilton, H., Meltzer, H., Goodman, R., 2007. Child Mental Health is Everybody's Business: The Prevalence of Contact with Public Sector Services by Type of Disorder Among British School Children in a Three-Year Period. *Child Adolesc. Ment. Health* 12, 13–20. <https://doi.org/10.1111/j.1475-3588.2006.00414.x>
- Foucault, M., 1972. *The archaeology of knowledge*. Pantheon Books, New York.
- Franklin, C., Kim, J.S., Beretvas, T.S., Zhang, A., Guz, S., Park, S., Montgomery, K., Chung, S., Maynard, B.R., 2017. The Effectiveness of Psychosocial Interventions Delivered by Teachers in Schools: A Systematic Review and Meta-Analysis. *Clin. Child Fam. Psychol. Rev.* 20, 333–350. <https://doi.org/10.1007/s10567-017-0235-4>
- Gallacher, L.A., Gallagher, M., 2008. Methodological Immaturity in Childhood Research?: Thinking through participatory methods. *Childhood* 15. <https://doi.org/10.1177/0907568208091672>
- Galletta, A., Cross, W.E., 2013. *Mastering the Semi-Structured Interview and Beyond: From Research Design to Analysis and Publication*. NYU Press.
- Giddens, A., 1984. *The Constitution of Society: Outline of the Theory of Structuration*. University of California Press.
- Goldberg, J.M., Sklad, M., Elfrink, T.R., Schreurs, K.M.G., Bohlmeijer, E.T., Clarke, A.M., 2019. Effectiveness of interventions adopting a whole school approach to enhancing social and emotional development: a meta-analysis. *Eur. J. Psychol. Educ.* 34, 755–782. <https://doi.org/10.1007/s10212-018-0406-9>
- Goodman, A., Joyce, R., Smith, J.P., 2011. The long shadow cast by childhood physical and mental problems on adult life. *Proc. Natl. Acad. Sci. U. S. A.* 108, 6032–6037. <https://doi.org/10.1073/pnas.1016970108>
- Green, H., McGinnity, A., Meltzer, H., Ford, T., Goodman, R., 2004. *Mental Health of Children and Young People in Great Britain, 2004*. Office for National Statistics.
- Greenberg, M.T., 2006. Promoting Resilience in Children and Youth. *Ann. N. Y. Acad. Sci.* 1094, 139–150. <https://doi.org/10.1196/annals.1376.013>

- Greenhalgh, T., Papoutsi, C., 2019. Spreading and scaling up innovation and improvement. *BMJ* 365. <https://doi.org/10.1136/bmj.l2068>
- Gronholm, P.C., Nye, E., Michelson, D., 2018. Stigma related to targeted school-based mental health interventions: A systematic review of qualitative evidence. *J. Affect. Disord.* 240, 17–26. <https://doi.org/10.1016/j.jad.2018.07.023>
- Hallam, S., Rhamie, J., Shaw, J., 2006. Evaluation of the Primary Behaviour and Attendance Pilot (Monograph). Department for Education and Skills, London.
- Hammersley, M., 2017. Interview data: a qualified defence against the radical critique. *Qual. Res.* 17, 173–186. <https://doi.org/10.1177/1468794116671988>
- Hammersley, M., 1992. *What's wrong with ethnography?* Routledge, London.
- Harding, S., Evans, R., Morris, R., Gunnell, D., Ford, T., Hollingworth, W., Tilling, K., Bell, S., Grey, J., Brockman, R., Campbell, R., Araya, R., Murphy, S., Kidger, J., 2019. Is teachers' mental health and wellbeing associated with students' mental health and wellbeing? *J. Affect. Disord.* 242, 180–187. <https://doi.org/10.1016/j.jad.2018.08.080>
- Harrison, H., Birks, M., Franklin, R., Mills, J., 2017. Case Study Research: Foundations and Methodological Orientations. *Forum Qual. Sozialforschung* Forum Qual. Soc. Res. 18. <https://doi.org/10.17169/fqs-18.1.2655>
- Hartley, J.E.K., Henderson, M., 2018. Mental health promotion for young people – the case for yoga in schools. *Educ. North* 25, 139–147.
- Hawe, P., Shiell, A., Riley, T., 2009. Theorising interventions as events in systems. *Am. J. Community Psychol.* 43, 267–276. <https://doi.org/10.1007/s10464-009-9229-9>
- Hawe, P., Shiell, A., Riley, T., Gold, L., 2004. Methods for exploring implementation variation and local context within a cluster randomised community intervention trial. *J. Epidemiol. Community Health* 58, 788–793. <https://doi.org/10.1136/jech.2003.014415>
- Heller, L.R., Fantuzzo, J.W., 1993. Reciprocal peer tutoring and parent partnership: Does parent involvement make a difference? *Sch. Psychol. Rev.* 22, 517–534.
- Henderson, M., Tweedie, S., Smillie, S., Wight, D., 2014. Social and Emotional Education and Development (SEED): a stratified, cluster randomised trial of a multi-component primary school intervention in Scotland. *Eur. J. Public Health* 24. <https://doi.org/10.1093/eurpub/cku163.048>
- Henderson, M., West, P., Raad, G., 2005. School effects on health behaviours. *Educ. Health* 23, 57–60.
- Herlitz, L., MacIntyre, H., Osborn, T., Bonell, C., 2020. The sustainability of public health interventions in schools: a systematic review. *Implement. Sci.* 15, 4. <https://doi.org/10.1186/s13012-019-0961-8>
- Hetherington, L.E.J., 2013. Complexity Thinking and Methodology: The Potential of 'Complex Case Study' for Educational Research. *Complicity: An International Journal of Complexity and Education* 10.
- Higgins, E., O'Sullivan, S., 2015. "What Works": systematic review of the "FRIENDS for Life" programme as a universal school-based intervention programme for the prevention of child and youth anxiety. *Educ. Psychol. Pract.* 31, 424–438. <https://doi.org/10.1080/02667363.2015.1086977>
- Highet, G., 2003. Cannabis and smoking research: interviewing young people in self-selected friendship pairs. *Health Educ. Res.* 18, 108–118. <https://doi.org/10.1093/her/18.1.108>

- Hobbs, G., Vignoles, A., 2010. Is children's free school meal 'eligibility' a good proxy for family income? *Br. Educ. Res. J.* 36, 673–690.
<https://doi.org/10.1080/01411920903083111>
- Holland, J.H., 1998. *Emergence: From chaos to order*. Perseus Books, USA.
- Holmes, E.A., Ghaderi, A., Harmer, C.J., Ramchandani, P.G., Cuijpers, P., Morrison, A.P., Roiser, J.P., Bockting, C.L.H., O'Connor, R.C., Shafran, R., Moulds, M.L., Craske, M.G., 2018. The Lancet Psychiatry Commission on psychological treatments research in tomorrow's science. *Lancet Psychiatry* 5, 237–286. [https://doi.org/10.1016/S2215-0366\(17\)30513-8](https://doi.org/10.1016/S2215-0366(17)30513-8)
- Houston, S., 2001. Beyond Social Constructionism: Critical Realism and Social Work. *Br. J. Soc. Work* 31, 845–861. <https://doi.org/10.1093/bjsw/31.6.845>
- Howarth, E., Devers, K., Moore, G., O'Cathain, A., Dixon-Woods, M., 2016. Contextual issues and qualitative research, Challenges, solutions and future directions in the evaluation of service innovations in health care and public health. NIHR Journals Library. <https://doi.org/10.3310/hsdr04160-105>
- Hughes, N.K., Schlösser, A., 2014. The effectiveness of nurture groups: a systematic review. *Emot. Behav. Difficulties* 19, 386–409.
<https://doi.org/10.1080/13632752.2014.883729>
- Humphrey, N., 2017. The role of schools in promoting children's mental health, in: *Critical Issues in Child and Adolescent Mental Health*. Red Globe Press, pp. 129–147. https://doi.org/10.1057/978-1-137-54747-7_9
- Humphrey, N., Barlow, A., Wigelsworth, M., Lendrum, A., Pert, K., Joyce, C., Stephens, E., Wo, L., Squires, G., Woods, K., Calam, R., Turner, A., 2016. A cluster randomized controlled trial of the Promoting Alternative Thinking Strategies (PATHS) curriculum. *J. Sch. Psychol.* 58, 73–89.
<https://doi.org/10.1016/j.jsp.2016.07.002>
- Humphrey, N., Lendrum, A., Wigelsworth, M., 2013. Making the most out of school-based prevention: lessons from the social and emotional aspects of learning (SEAL) programme. *Emot. Behav. Difficulties* 18, 248–260.
<https://doi.org/10.1080/13632752.2013.819251>
- Humphrey, N., Lendrum, A., Wigelsworth, M., 2010. Social and emotional aspects of learning (SEAL) programme in secondary schools: National evaluation. Department for Education, London.
- Humphrey, N., Lendrum, A., Wigelsworth, M., Kalambouka, A., 2009. Implementation of primary Social and Emotional Aspects of Learning small group work: a qualitative study. *Pastor. Care Educ.* 27, 219–239.
<https://doi.org/10.1080/02643940903136808>
- Humphrey, N., Wigelsworth, M., 2016. Making the case for universal school-based mental health screening. *Emot. Behav. Difficulties* 21, 22–42.
<https://doi.org/10.1080/13632752.2015.1120051>
- Iachini, A.L., Warren, M.E., Splett, J.W., George, M.W., Taylor, L.K., Weist, M.D., 2015. Exploring the impact of a pre-service interprofessional educational intervention for school mental health trainees. *J. Interprof. Care* 29, 162–164.
<https://doi.org/10.3109/13561820.2014.934957>
- Jaffee, S., 2018. Promises and pitfalls in the development of biomarkers that can promote early intervention in children at risk. *J. Child Psychol. Psychiatry* 59, 97–98. <https://doi.org/10.1111/jcpp.12869>
- James, A., 2007. Giving Voice to Children's Voices: Practices and Problems, Pitfalls and Potentials. *Am. Anthropol.* 109, 261–272.
<https://doi.org/10.1525/aa.2007.109.2.261>

- James, A., Jenks, C., Prout, A., 1998. *Theorising childhood*, in: *Childhood: Critical Concepts in Sociology*. Polity Press, Cambridge.
- Jiménez Barbero, J.A., Ruiz Hernández, J., Llor-Zaragoza, L., Pérez-García, M., Llor-Esteban, B., 2015. Effectiveness of anti-bullying school programs: A meta-analysis. *Child. Youth Serv. Rev.* 61. <https://doi.org/10.1016/j.chilyouth.2015.12.015>
- Jones, D.E., Greenberg, M., Crowley, M., 2015. Early Social-Emotional Functioning and Public Health: The Relationship Between Kindergarten Social Competence and Future Wellness. *Am. J. Public Health* 105, 2283–2290. <https://doi.org/10.2105/AJPH.2015.302630>
- Jootun, D., McGhee, G., Marland, G.R., 2009. Reflexivity: promoting rigour in qualitative research [WWW Document]. <https://doi.org/10.7748/ns.23.23.42.s50>
- Junghans, C., Jones, M., 2007. Consent bias in research: how to avoid it. *Heart* 93, 1024–1025. <https://doi.org/10.1136/hrt.2007.120113>
- Kallio, H., Pietilä, A.-M., Johnson, M., Kangasniemi, M., 2016. Systematic methodological review: developing a framework for a qualitative semi-structured interview guide. *J. Adv. Nurs.* 72, 2954–2965. <https://doi.org/10.1111/jan.13031>
- Kam, C.-M., Greenberg, M.T., Kusche, C.A., 2004. Sustained Effects of the PATHS Curriculum on the Social and Psychological Adjustment of Children in Special Education. *J. Emot. Behav. Disord.* 12, 66–78.
- Kavanagh, J., Oliver, S., Caird, J., Tucker, H., Greaves, A., Harden, A., Oakley, A., Lorenc, T., Thomas, J., 2009. Inequalities and the mental health of young people: a systematic review of secondary school-based cognitive behavioural interventions. Centre for Reviews and Dissemination (UK).
- Kendal, S., Callery, P., Keeley, P., 2011. The feasibility and acceptability of an approach to emotional wellbeing support for high school students. *Child Adolesc. Ment. Health* 16, 193–200. <https://doi.org/10.1111/j.1475-3588.2011.00602.x>
- Keshavarz, N., Nutbeam, D., Rowling, L., Khavarpour, F., 2010. Schools as social complex adaptive systems: a new way to understand the challenges of introducing the health promoting schools concept. *Soc. Sci. Med.* 1982 70, 1467–1474. <https://doi.org/10.1016/j.socscimed.2010.01.034>
- Kessler, R.C., Berglund, P., Demler, O., Jin, R., Merikangas, K.R., Walters, E.E., 2005. Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Arch. Gen. Psychiatry* 62, 593–602. <https://doi.org/10.1001/archpsyc.62.6.593>
- Kidger, J., Araya, R., Donovan, J., Gunnell, D., 2012. The Effect of the School Environment on the Emotional Health of Adolescents: A Systematic Review. *Pediatrics* 129, 925–949. <https://doi.org/10.1542/peds.2011-2248>
- Kidger, J., Evans, R., Tilling, K., Hollingworth, W., Campbell, R., Ford, T., Murphy, S., Araya, R., Morris, R., Kadir, B., Fernandez, A.M., Bell, S.L., Harding, S., Brockman, R., Grey, J., Gunnell, D., 2016. Protocol for a cluster randomised controlled trial of an intervention to improve the mental health support and training available to secondary school teachers - the WISE (Wellbeing in Secondary Education) study. *BMC Public Health* 16, 1089. <https://doi.org/10.1186/s12889-016-3756-8>
- Kidger, J., Stone, T., Tilling, K., Brockman, R., Campbell, R., Ford, T., Hollingworth, W., King, M., Araya, R., Gunnell, D., 2016. A pilot cluster randomised

- controlled trial of a support and training intervention to improve the mental health of secondary school teachers and students – the WISE (Wellbeing in Secondary Education) study. *BMC Public Health* 16, 1060.
<https://doi.org/10.1186/s12889-016-3737-y>
- Kieling, C., Baker-Henningham, H., Belfer, M., Conti, G., Ertem, I., Omigbodun, O., Rohde, L.A., Srinath, S., Ulkuer, N., Rahman, A., 2011. Child and adolescent mental health worldwide: evidence for action. *The Lancet* 378, 1515–1525.
[https://doi.org/10.1016/S0140-6736\(11\)60827-1](https://doi.org/10.1016/S0140-6736(11)60827-1)
- Kilgus, S.P., Reinke, W.M., Jimerson, S.R., 2015. Understanding mental health intervention and assessment within a multi-tiered framework: Contemporary science, practice, and policy. *Sch. Psychol. Q. Off. J. Div. Sch. Psychol. Am. Psychol. Assoc.* 30, 159–165. <https://doi.org/10.1037/spq0000118>
- King, T., Fazel, M., 2019. Examining the mental health outcomes of peer-led school-based interventions on young people aged between 4 and 18 years old: a systematic review protocol. *Syst. Rev.* 8, 104. <https://doi.org/10.1186/s13643-019-1027-3>
- Kirk, D., MacDonald, D., 2001. Teacher voice and ownership of curriculum change. *J. Curric. Stud.* 33, 551–567. <https://doi.org/10.1080/00220270010016874>
- Kosik, R., Mandell, G., Fan, A.P., Nguyen, T., Chen, J., Eaton, W.W., 2018. The association between childhood educational attainment and adult mental health and status: A thirty-year longitudinal follow up study. *Eur. J. Psychiatry* 32, 53–62. <https://doi.org/10.1016/j.ejpsy.2018.01.001>
- Kuyken, W., Weare, K., Ukoumunne, O.C., Vicary, R., Motton, N., Burnett, R., Cullen, C., Hennesly, S., Huppert, F., 2013. Effectiveness of the Mindfulness in Schools Programme: non-randomised controlled feasibility study. *Br. J. Psychiatry* 203, 126–131. <https://doi.org/10.1192/bjp.bp.113.126649>
- Langley, A.K., Nadeem, E., Kataoka, S.H., Stein, B.D., Jaycox, L.H., 2010. Evidence-Based Mental Health Programs in Schools: Barriers and Facilitators of Successful Implementation. *School Ment. Health* 2, 105–113.
<https://doi.org/10.1007/s12310-010-9038-1>
- Larson, J., Marsh, J., 2014. *Making Literacy Real: Theories and Practices for Learning and Teaching*. SAGE.
- Lendrum, A., Humphrey, N., Kalamouka, A., Wigelsworth, M., 2009. Implementing primary Social and Emotional Aspects of Learning (SEAL) small group interventions: recommendations for practitioners. *Emot. Behav. Difficulties* 14, 229–238. <https://doi.org/10.1080/13632750903073509>
- Lendrum, A., Humphrey, N., Wigelsworth, M., 2013. Social and emotional aspects of learning (SEAL) for secondary schools: implementation difficulties and their implications for school-based mental health promotion. *Child Adolesc. Ment. Health* 18, 158–164. <https://doi.org/10.1111/camh.12006>
- Leow, A.C.S., 2011. Policy-as-discourse and schools in the role of health promotion: the application of Bernstein’s transmission context in policy analysis. *Discourse Stud. Cult. Polit. Educ.* 32, 309–328.
<https://doi.org/10.1080/01596306.2011.573249>
- Leow, A.C.S., Macdonald, D., Hay, P., McCuaig, L., 2014. Health-education policy interface: the implementation of the Eat Well Be Active policies in schools. *Sport Educ. Soc.* 19, 991–1013.
<https://doi.org/10.1080/13573322.2012.737777>
- Lichterman, P., 2017. Interpretive reflexivity in ethnography. *Ethnography* 18, 35–45.
<https://doi.org/10.1177/1466138115592418>

- Lincoln, Y.S., Guba, E.G., 1985. *Naturalistic Inquiry*. SAGE, US.
- Little, M., Berry, V.L., Morpeth, L., Blower, S., Axford, N., Taylor, R., Bywater, T., Lehtonen, M., Tobin, K., 2012. The impact of three evidence-based programmes delivered in public systems in Birmingham, UK. *Int. J. Confl. Violence* 6, 260–272.
- Lomax, H., 2012. Contested voices? Methodological tensions in creative visual research with children. *Int. J. Soc. Res. Methodol.* 15, 105–117. <https://doi.org/10.1080/13645579.2012.649408>
- Lombas, A.S., Jiménez, T.I., Arguís-Rey, R., Hernández-Paniello, S., Valdivia-Salas, S., Martín-Albo, J., 2019. Impact of the Happy Classrooms Programme on Psychological Well-being, School Aggression, and Classroom Climate. *Mindfulness* 10, 1642–1660. <https://doi.org/10.1007/s12671-019-01132-8>
- Lomholt, J.J., Johnsen, D.B., Silverman, W.K., Heyne, D., Jeppesen, P., Thastum, M., 2020. Feasibility Study of Back2School, a Modular Cognitive Behavioral Intervention for Youth With School Attendance Problems. *Front. Psychol.* 11. <https://doi.org/10.3389/fpsyg.2020.00586>
- Lupien, S.J., Ouellet-Morin, I., Trépanier, L., Juster, R.P., Marin, M.F., Francois, N., Sindi, S., Wan, N., Findlay, H., Durand, N., Cooper, L., Schramek, T., Andrews, J., Corbo, V., Dedovic, K., Lai, B., Plusquellec, P., 2013. The DeStress for Success Program: effects of a stress education program on cortisol levels and depressive symptomatology in adolescents making the transition to high school. *Neuroscience* 249, 74–87. <https://doi.org/10.1016/j.neuroscience.2013.01.057>
- Lwembe, S., Green, S.A., Chigwende, J., Ojwang, T., Dennis, R., 2017. Co-production as an approach to developing stakeholder partnerships to reduce mental health inequalities: an evaluation of a pilot service. *Prim. Health Care Res. Dev.* 18, 14–23. <https://doi.org/10.1017/S1463423616000141>
- MacDonald, G., O'Hara, K., Society of Health Education/Promotion Specialists, 1998. Ten elements of mental health, its promotion and demotion: implications for practice. Society of Health Education and Health Promotion Specialists, Glasgow.
- Mackenzie, K., Williams, C., 2018. Universal, school-based interventions to promote mental and emotional well-being: what is being done in the UK and does it work? A systematic review. *BMJ Open* 8, e022560. <https://doi.org/10.1136/bmjopen-2018-022560>
- Mand, K., 2012. Giving children a 'voice': arts-based participatory research activities and representation: *International Journal of Social Research Methodology* 15.
- Mandell, N., 1988. The Least-Adult Role in Studying Children: *J. Contemp. Ethnogr.* <https://doi.org/10.1177/0891241688164002>
- Mannay, D., 2019. Revisualizing data: engagement, impact and multimodal dissemination, in: Pauwels, L., Mannay, D. (Eds.), *The Sage Handbook of Visual Research Methods* (2nd Edition). SAGE Publications, London.
- Mannay, D., 2013. 'Who put that on there ... why why why?' Power games and participatory techniques of visual data production. *Vis. Stud.* 28, 136–146. <https://doi.org/10.1080/1472586X.2013.801635>
- Maughan, B., Iervolino, A.C., Collishaw, S., 2005. Time trends in child and adolescent mental disorders. *Curr. Opin. Psychiatry* 18, 381–385. <https://doi.org/10.1097/01.yco.0000172055.25284.f2>
- Mautone, J.A., DuPaul, G.J., Jitendra, A.K., Tresco, K.E., Junod, R.V., Volpe, R.J., 2009. The relationship between treatment integrity and acceptability of

- reading interventions for children with Attention-Deficit/Hyperactivity Disorder. *Psychol. Sch.* 46, 919–931. <https://doi.org/10.1002/pits.20434>
- May, C.R., Johnson, M., Finch, T., 2016. Implementation, context and complexity. *Implement. Sci.* 11. <https://doi.org/10.1186/s13012-016-0506-3>
- May, T., 2011. *Social Research: Issues, Methods and Research*. McGraw-Hill Education (UK).
- Mayall, 2000. The sociology of childhood in relation to children's rights. *Int. J. Child. Rights* 8, 243–259. <https://doi.org/10.1163/15718180020494640>
- McCabe, M., Costello, S., Roodenburg, J., 2017. The Child's Voice in Determining Program Acceptability for a School-Based Mindfulness Intervention. *Soc. Sci.* 6, 155. <https://doi.org/10.3390/socsci6040155>
- McLeroy, K.R., Bibeau, D., Steckler, A., Glanz, K. 1988. An ecological perspective on health promotion programs. *Health Educ Q.* 15, 351-377. <https://doi.org/10.1177/109019818801500401>.
- Medin, E., Jutengren, G., 2020. Children's Perspectives on a School-Based Social and Emotional Learning Program. *Child. Sch.* 42, 121–130. <https://doi.org/10.1093/cs/cdaa007>
- Merry, U., 1995. *Coping with uncertainty: Insights from the new sciences of chaos, self-organization and complexity*. Praeger Publishers, Westport, CT.
- Metsäpelto, R.-L., Pulkkinen, L., Tolvanen, A., 2010. A school-based intervention program as a context for promoting socioemotional development in children. *Eur. J. Psychol. Educ.* 25, 381–398. <https://doi.org/10.1007/s10212-010-0034-5>
- Mitchell, J.C., 1983. Case and situation analysis, in: *The Manchester School: Practice and Ethnographic Praxis in Anthropology*. Berghain, Oxford.
- Moore, G.F., Evans, R.E., 2017. What theory, for whom and in which context? Reflections on the application of theory in the development and evaluation of complex population health interventions. *SSM - Popul. Health* 3, 132–135. <https://doi.org/10.1016/j.ssmph.2016.12.005>
- Movsisyan, A., Arnold, L., Evans, R., Hallingberg, B., Moore, G., O'Cathain, A., Pfadenhauer, L.M., Segrott, J., Rehfues, E., 2019. Adapting evidence-informed complex population health interventions for new contexts: a systematic review of guidance. *Implement. Sci.* 14, 105. <https://doi.org/10.1186/s13012-019-0956-5>
- Murray, E., Treweek, S., Pope, C., MacFarlane, A., Ballini, L., Dowrick, C., Finch, T., Kennedy, A., Mair, F., O'Donnell, C., Ong, B.N., Rapley, T., Rogers, A., May, C., 2010. Normalisation process theory: a framework for developing, evaluating and implementing complex interventions. *BMC Med.* 8, 63. <https://doi.org/10.1186/1741-7015-8-63>
- Mychailyszyn, M.P., Brodman, D.M., Read, K.L., Kendall, P.C., 2012. Cognitive-Behavioral School-Based Interventions for Anxious and Depressed Youth: A Meta-Analysis of Outcomes. *Clin. Psychol. Sci. Pract.* 19, 129–153. <https://doi.org/10.1111/j.1468-2850.2012.01279.x>
- Myers, K., 2012. Marking time: some methodological and historical perspectives on the 'crisis of childhood.' *Res. Pap. Educ.* 27, 409–422. <https://doi.org/10.1080/02671522.2012.690237>
- Naderifar, M., Goli, H., Ghaljaie, F., 2017. Snowball Sampling: A Purposeful Method of Sampling in Qualitative Research. <https://doi.org/10.5812/sdme.67670>
- NHS Digital, 2018. *Mental Health of Children and Young People in England, 2017* [PAS] [WWW Document]. NHS Digit. URL <https://digital.nhs.uk/data-and->

- information/publications/statistical/mental-health-of-children-and-young-people-in-england/2017/2017 (accessed 9.5.20).
- Niebieszczanski, R.J., Dent, H., McGowan, A., 2016. "Your personality is the intervention": a grounded theory of mental health nurses' beliefs about hope and experiences of fostering hope within a secure setting. *J. Forensic Psychiatry Psychol.* 27, 419–442.
<https://doi.org/10.1080/14789949.2015.1134626>
- Nilsson, A., Sörman, K., Klingvall, J., Ovelius, E., Lundberg, J., Hellner, C., 2019. MyCompass in a Swedish context – lessons learned from the transfer of a self-guided intervention targeting mental health problems. *BMC Psychiatry* 19, 51. <https://doi.org/10.1186/s12888-019-2039-1>
- Noble, H., Smith, J., 2015. Issues of validity and reliability in qualitative research. *Evid. Based Nurs.* 18, 34–35. <https://doi.org/10.1136/eb-2015-102054>
- O’Cathain, A., Croot, L., Duncan, E., Rousseau, N., Sworn, K., Turner, K.M., Yardley, L., Hoddinott, P., 2019. Guidance on how to develop complex interventions to improve health and healthcare. *BMJ Open* 9, e029954. <https://doi.org/10.1136/bmjopen-2019-029954>
- O’Connor, C.A., Dyson, J., Cowdell, F., Watson, R., 2018. Do universal school-based mental health promotion programmes improve the mental health and emotional wellbeing of young people? A literature review. *J. Clin. Nurs.* 27, e412–e426. <https://doi.org/10.1111/jocn.14078>
- Oliver, C., 2012. Critical Realist Grounded Theory: A New Approach for Social Work Research. *Br. J. Soc. Work* 42, 371–387. <https://doi.org/10.1093/bjsw/bcr064>
- Padgett, D.K., 2016. *Qualitative Methods in Social Work Research*, 3rd ed. SAGE, Thousand Oaks, CA, US.
- Pandey, A., Hale, D., Das, S., Goddings, A.-L., Blakemore, S.-J., Viner, R.M., 2018. Effectiveness of Universal Self-regulation–Based Interventions in Children and Adolescents: A Systematic Review and Meta-analysis. *JAMA Pediatr.* 172, 566–575. <https://doi.org/10.1001/jamapediatrics.2018.0232>
- Parahoo, K., 2006. *Nursing Research: Principles, Process and Issues*. Palgrave, Hampshire.
- Patalay, P., Annis, J., Sharpe, H., Newman, R., Main, D., Ragnathan, T., Parkes, M., Clarke, K., 2017. A Pre-Post Evaluation of OpenMinds: a Sustainable, Peer-Led Mental Health Literacy Programme in Universities and Secondary Schools. *Prev. Sci.* 18, 995–1005. <https://doi.org/10.1007/s11121-017-0840-y>
- Pawson, R., 2006. *Evidence-based policy: A realist perspective*. SAGE, London.
- Pawson, R., Tilley, N., 1997. *Realistic evaluation*. SAGE, London.
- Pearrow, M., Whelley, P., 2006. School-Based Mental Health Services for Children and Adolescents, in: H. Fisher, W. (Ed.), *Research on Community-Based Mental Health Services for Children and Adolescents*, Research in Community and Mental Health. Emerald Group Publishing Limited, pp. 33–51. [https://doi.org/10.1016/S0192-0812\(06\)14003-9](https://doi.org/10.1016/S0192-0812(06)14003-9)
- Pearson, M., Chilton, R., Wyatt, K., Abraham, C., Ford, T., Woods, H., Anderson, R., 2015. Implementing health promotion programmes in schools: a realist systematic review of research and experience in the United Kingdom. *Implement. Sci.* 10, 149. <https://doi.org/10.1186/s13012-015-0338-6>
- Perry, B., 2011. Case study research, in: *Social Research: Issues, Methods and Process*. Open University Press, Berkshire.
- Pfadenhauer, L.M., Gerhardus, A., Mozygemba, K., Lysdahl, K.B., Booth, A., Hofmann, B., Wahlster, P., Polus, S., Burns, J., Brereton, L., Rehfuss, E.,

2017. Making sense of complexity in context and implementation: the Context and Implementation of Complex Interventions (CICI) framework. *Implement. Sci.* 12, 21. <https://doi.org/10.1186/s13012-017-0552-5>
- Pfadenhauer, L.M., Mozygemba, K., Gerhardus, A., Hofmann, B., Booth, A., Lysdahl, K.B., Tummers, M., Burns, J., Rehfuss, E.A., 2015. Context and implementation: A concept analysis towards conceptual maturity. *Z. Evidenz Fortbild. Qual. Im Gesundheitswesen* 109, 103–114. <https://doi.org/10.1016/j.zefq.2015.01.004>
- Phillips, A., Morgan, G., 2014. Co-production within health and social care – the implications for Wales? *Qual. Ageing Older Adults* 15, 10–20. <https://doi.org/10.1108/QAOA-06-2013-0014>
- Pilgrim, D., 2014. Some implications of critical realism for mental health research. *Soc. Theory Health* 12, 1–21. <https://doi.org/10.1057/sth.2013.17>
- Plant, M., 2005. Critical realism: a common sense philosophy for environmental education? [WWW Document]. URL <http://www.leeds.ac.uk/educol/documents/150510.htm> (accessed 5.18.20).
- Polit, D.F., Beck, C.T., 2009. *Essentials of Nursing Research: Appraising Evidence for Nursing Practice*. Lippincott Williams & Wilkins.
- Punch, S., 2002. Research with Children: The Same or Different from Research with Adults? *Childhood* 9, 321–341. <https://doi.org/10.1177/0907568202009003005>
- Raby, R., 2007. Across a Great Gulf? Conducting Research With Adolescents, in: *Representing Youth: Methodological Issues in Critical Youth Studies*. NYU Press.
- Rafalovich, A., 2013. Attention Deficit-Hyperactivity Disorder as the Medicalization of Childhood: Challenges from and for Sociology. *Sociol. Compass* 7, 343–354. <https://doi.org/10.1111/soc4.12034>
- Rapee, R.M., Wignall, A., Sheffield, J., Kowalenko, N., Davis, A., McLoone, J., Spence, S.H., 2006. Adolescents' Reactions to Universal and Indicated Prevention Programs for Depression: Perceived Stigma and Consumer Satisfaction. *Prev. Sci.* 7, 167–177. <https://doi.org/10.1007/s11121-006-0035-4>
- Reeve, J., Cooper, L., Harrington, S., Rosbottom, P., Watkins, J., 2016. Developing, delivering and evaluating primary mental health care: the co-production of a new complex intervention. *BMC Health Serv. Res.* 16, 470. <https://doi.org/10.1186/s12913-016-1726-6>
- Rehm, M.L., Allison, B., 2006. Positionality in Teaching Culturally Diverse Students: Implications for Family and Consumer Sciences Teacher Education Programs. *Fam. Consum. Sci. Res. J.* 34, 260–275. <https://doi.org/10.1177/1077727X05283593>
- Riglin, L., Petrides, K.V., Frederickson, N., Rice, F., 2014. The relationship between emotional problems and subsequent school attainment: A meta-analysis. *J. Adolesc.* 37, 335–346. <https://doi.org/10.1016/j.adolescence.2014.02.010>
- Ringeisen, H., Henderson, K., Hoagwood, K., 2003. Context Matters: Schools and the “Research to Practice Gap” in Children’s Mental Health. *Sch. Psychol. Rev.* 32.
- Rones, M., Hoagwood, K., 2000. School-Based Mental Health Services: A Research Review. *Clin. Child Fam. Psychol. Rev.* 3, 223–241. <https://doi.org/10.1023/A:1026425104386>

- Rubin, H., Rubin, I., 2005. *Qualitative Interviewing (2nd ed.): The Art of Hearing Data*. SAGE Publications, Inc., 2455 Teller Road, Thousand Oaks California 91320 United States. <https://doi.org/10.4135/9781452226651>
- Rütten, A., Gelius, P., 2011. The interplay of structure and agency in health promotion: integrating a concept of structural change and the policy dimension into a multi-level model and applying it to health promotion principles and practice. *Soc. Sci. Med.* 1982 73, 953–959. <https://doi.org/10.1016/j.socscimed.2011.07.010>
- Sadler, K., Vizard, T., Ford, T., Goodman, A., Goodman, R., McManus, S., 2018. *Mental Health of Children and Young People in England, 2017: Trends and Characteristics*.
- Salerno, J.P., 2016. Effectiveness of Universal School-Based Mental Health Awareness Programs Among Youth in the United States: A Systematic Review. *J. Sch. Health* 86, 922–931. <https://doi.org/10.1111/josh.12461>
- Sancassiani, F., Pintus, E., Holte, A., Paulus, P., Moro, M.F., Cossu, G., Angermeyer, M.C., Carta, M.G., Lindert, J., 2015. Enhancing the Emotional and Social Skills of the Youth to Promote their Wellbeing and Positive Development: A Systematic Review of Universal School-based Randomized Controlled Trials. *Clin. Pract. Epidemiol. Ment. Health CP EMH* 11, 21–40. <https://doi.org/10.2174/1745017901511010021>
- Sanchez, A.L., Cornacchio, D., Poznanski, B., Golik, A.M., Chou, T., Comer, J.S., 2018. The Effectiveness of School-Based Mental Health Services for Elementary-Aged Children: A Meta-Analysis. *J. Am. Acad. Child Adolesc. Psychiatry* 57, 153–165. <https://doi.org/10.1016/j.jaac.2017.11.022>
- Saunders, B., Sim, J., Kingstone, T., Baker, S., Waterfield, J., Bartlam, B., Burroughs, H., Jinks, C., 2018. Saturation in qualitative research: exploring its conceptualization and operationalization. *Qual. Quant.* 52, 1893–1907. <https://doi.org/10.1007/s11135-017-0574-8>
- Sayer, A., 2000. *Realism and Social Science*. SAGE.
- Schachter, H.M., Girardi, A., Ly, M., Lacroix, D., Lumb, A.B., van Berkomp, J., Gill, R., 2008. Effects of school-based interventions on mental health stigmatization: a systematic review. *Child Adolesc. Psychiatry Ment. Health* 2, 18. <https://doi.org/10.1186/1753-2000-2-18>
- Schonfeld, D.J., Adams, R.E., Fredstrom, B.K., Weissberg, R.P., Gilman, R., Voyce, C., Tomlin, R., Speese-Linehan, D., 2015. Cluster-randomized trial demonstrating impact on academic achievement of elementary social-emotional learning. *Sch. Psychol. Q. Off. J. Div. Sch. Psychol. Am. Psychol. Assoc.* 30, 406–420. <https://doi.org/10.1037/spq0000099>
- Schrecker, T., 2013. Beyond “Run, Knit and Relax”: Can Health Promotion in Canada Advance the Social Determinants of Health Agenda? *Healthc. Policy Polit. Sante* 9, 48–58. <https://doi.org/10.12927/hcpol.2013.23590>
- Scott, D., 2005. Critical Realism and Empirical Research Methods in Education. *J. Philos. Educ.* 39, 633–646. <https://doi.org/10.1111/j.1467-9752.2005.00460.x>
- Shearn, K., Allmark, P., Piercy, H., Hirst, J., 2017. Building Realist Program Theory for Large Complex and Messy Interventions. *Int. J. Qual. Methods* 16, 1609406917741796. <https://doi.org/10.1177/1609406917741796>
- Sheehan, R., 2017. *Mental Illness in Children: Childhood Illness and Supporting the Family*. *Brain Sci.* 7. <https://doi.org/10.3390/brainsci7080097>
- Shenton, A.K., 2004. Strategies for ensuring trustworthiness in qualitative research projects. *Educ. Inf.* 22, 63–75. <https://doi.org/10.3233/EFI-2004-22201>

- Shoveller, J., Viehbeck, S., Ruggiero, E., Greyson, D., Thomson, K., Knight, R., 2015. A critical examination of representations of context within research on population health interventions. *Crit. Public Health* 1–14. <https://doi.org/10.1080/09581596.2015.1117577>
- Sianou-Kyrgiou, E., Tsiplakides, I., 2009. Choice and social class of medical school students in Greece. *Br. J. Sociol. Educ.* 30, 727–740. <https://doi.org/10.1080/01425690903235276>
- Siddiqui, N., Ventista, O., 2018. A review of school-based interventions for the improvement of social emotional skills and wider outcomes of education. *Int. J. Educ. Res.* 90. <https://doi.org/10.1016/j.ijer.2018.06.003>
- Silverman, D., 2015. *Interpreting Qualitative Data*. SAGE, London.
- Simons, H., 2009. *Case Study Research in Practice*. SAGE Publications.
- Singh, P., 2002. Pedagogising Knowledge: Bernstein's theory of the pedagogic device. *Br. J. Sociol. Educ.* 23, 571–582. <https://doi.org/10.1080/0142569022000038422>
- Singh, P., Thomas, S., Harris, J., 2013. Recontextualising policy discourses: a Bernsteinian perspective on policy interpretation, translation, enactment. *J. Educ. Policy* 28, 465–480. <https://doi.org/10.1080/02680939.2013.770554>
- Sparkes, E., Duarte, R.V., Raphael, J.H., Denny, E., Ashford, R.L., 2012. Qualitative exploration of psychological factors associated with spinal cord stimulation outcome: Chronic Illn. <https://doi.org/10.1177/1742395311433132>
- Spyrou, S., 2011. The limits of children's voices: From authenticity to critical, reflexive representation. *Childhood* 18. <https://doi.org/10.1177/0907568210387834>
- Sriprakash, A., 2011. The contributions of Bernstein's sociology to education development research. *Br. J. Sociol. Educ.* 32, 521–539. <https://doi.org/10.1080/01425692.2011.578436>
- Stake, R.E., 1995. *The Art of Case Study Research*. SAGE.
- Stallard, P., Simpson, N., Anderson, S., Carter, T., Osborn, C., Bush, S., 2005. An evaluation of the FRIENDS programme: a cognitive behaviour therapy intervention to promote emotional resilience. *Arch. Dis. Child.* 90, 1016–1019. <https://doi.org/10.1136/adc.2004.068163>
- Stallard, P., Simpson, N., Anderson, S., Goddard, M., 2008. The FRIENDS emotional health prevention programme. *Eur. Child Adolesc. Psychiatry* 17, 283–289. <https://doi.org/10.1007/s00787-007-0665-5>
- Star, S.L., 2010. This is Not a Boundary Object: Reflections on the Origin of a Concept. *Sci. Technol. Hum. Values.* <https://doi.org/10.1177/0162243910377624>
- Star, S.L., Griesemer, J.R., 1989. Institutional Ecology, 'Translations' and Boundary Objects: Amateurs and Professionals in Berkeley's Museum of Vertebrate Zoology, 1907-39: *Soc. Stud. Sci.* <https://doi.org/10.1177/030631289019003001>
- Stefan, C., Miclea, M., 2010. Prevention programmes targeting emotional and social development in preschoolers: Current status and future directions. *Early Child Dev. Care* 180, 1103–1128. <https://doi.org/10.1080/03004430902830263>
- Stokols, D., 1996. Translating social ecological theory into guidelines for community health promotion. *Am. J. Health Promot. AJHP* 10, 282–298. <https://doi.org/10.4278/0890-1171-10.4.282>

- Stoolmiller, M., Eddy, J.M., Reid, J.B., 2000. Detecting and describing preventive intervention effects in a universal school-based randomized trial targeting delinquent and violent behavior. *J. Consult. Clin. Psychol.* 68, 296–306.
- Sutton, L., 2009. 'They'd only call you a scally if you are poor': the impact of socio-economic status on children's identities. *Child. Geogr.* 7, 277–290. <https://doi.org/10.1080/14733280903024449>
- Taplin, S.H., Yabroff, K.R., Zapka, J., 2012. A Multilevel Research Perspective on Cancer Care Delivery: The Example of Follow-Up to An Abnormal Mammogram. *Cancer Epidemiol. Prev. Biomark.* 21, 1709–1715. <https://doi.org/10.1158/1055-9965.EPI-12-0265>
- Taylor, R.D., Oberle, E., Durlak, J.A., Weissberg, R.P., 2017. Promoting Positive Youth Development Through School-Based Social and Emotional Learning Interventions: A Meta-Analysis of Follow-Up Effects. *Child Dev.* 88, 1156–1171. <https://doi.org/10.1111/cdev.12864>
- Thorley, C., 2016. *Education, Education, Mental Health*. Institute for Public Policy Research, London, UK.
- Thorne, B., 1993. *Gender Play: Girls and Boys in School*. Rutgers University Press.
- Thorne, S., 2000. Data analysis in qualitative research. *Evid. Based Nurs.* 3, 68–70. <https://doi.org/10.1136/ebn.3.3.68>
- Turner, V.W., 1967. *Betwixt and Between: The Liminal Period in Rites of Passage*. Cornell University Press, Ithaca, NY.
- UK Government, 2018. *Data Protection Act 2018*.
- UK Government, 1998. *Data Protection Act 1998*.
- UNICEF, 1992. *UN Convention on the Rights of the Child (UNCRC)*.
- Vickery, C.E., Dorjee, D., 2016. Mindfulness Training in Primary Schools Decreases Negative Affect and Increases Meta-Cognition in Children. *Front. Psychol.* 6. <https://doi.org/10.3389/fpsyg.2015.02025>
- Villarreal, V., Ponce, C., Gutierrez, H., 2015. Treatment acceptability of interventions published in six school psychology journals: *Sch. Psychol. Int.* <https://doi.org/10.1177/0143034315574153>
- Waldron, S.M., Stallard, P., Grist, R., Hamilton-Giachritsis, C., 2018. The 'long-term' effects of universal school-based anxiety prevention trials: A systematic review. *Ment. Health Prev.* 11, 8–15. <https://doi.org/10.1016/j.mhp.2018.04.003>
- Walford, G., 2007. Classification and framing of interviews in ethnographic interviewing. *Ethnogr. Educ.* 2, 145–157. <https://doi.org/10.1080/17457820701350491>
- Waltz, T.J., Powell, B.J., Fernández, M.E., Abadie, B., Damschroder, L.J., 2019. Choosing implementation strategies to address contextual barriers: diversity in recommendations and future directions. *Implement. Sci.* 14, 42. <https://doi.org/10.1186/s13012-019-0892-4>
- Weare, K., 2015. Editorial: Child and adolescent mental health in schools. *Child Adolesc. Ment. Health* 20, e6–e8. <https://doi.org/10.1111/camh.12044>
- Weare, K., 2010. Mental Health and Social and Emotional Learning: Evidence, Principles, Tensions, Balances. *Adv. Sch. Ment. Health Promot.* 3, 5–17. <https://doi.org/10.1080/1754730X.2010.9715670>
- Weare, K., 2000. *Promoting mental, emotional and social health: a whole school approach*. Routledge.
- Weare, K., Murray, M., 2004. *Building a Sustainable Approach to Mental Health Work in Schools*. <https://doi.org/10.1080/14623730.2004.9721932>

- Weare, K., Nind, M., 2011. Mental health promotion and problem prevention in schools: what does the evidence say? *Health Promot. Int.* 26 Suppl 1, i29-69. <https://doi.org/10.1093/heapro/dar075>
- Weems, C.F., Scott, B.G., Graham, R.A., Banks, D.M., Russell, J.D., Taylor, L.K., Cannon, M.F., Varela, R.E., Scheeringa, M.A., Perry, A.M., Marino, R.C., 2015. Fitting Anxious Emotion-Focused Intervention into the Ecology of Schools: Results from a Test Anxiety Program Evaluation. *Prev. Sci.* 16, 200–210. <https://doi.org/10.1007/s11121-014-0491-1>
- Weiss, H.M., Cropanzano, R., 1996. Affective Events Theory: A theoretical discussion of the structure, causes and consequences of affective experiences at work, in: *Research in Organizational Behavior: An Annual Series of Analytical Essays and Critical Reviews*, Vol. 18. Elsevier Science/JAI Press, US, pp. 1–74.
- Wells, J., Barlow, J., Stewart-Brown, S., 2003. A systematic review of universal approaches to mental health promotion in schools. *Health Educ.* 103, 197–220. <https://doi.org/10.1108/09654280310485546>
- Welsh Government, 2020. Health and Well-being: Statements of what matters - Hwb [WWW Document]. URL <https://hwb.gov.wales/curriculum-for-wales/health-and-well-being/statements-of-what-matters/> (accessed 7.10.20).
- Welsh Government, 2016a. Education and Skills: StatsWales [WWW Document]. URL <https://statswales.gov.wales/Catalogue/Education-and-Skills> (accessed 5.24.20).
- Welsh Government, 2016b. My local school [WWW Document]. GOV.WALES. URL <https://gov.wales/my-local-school-guide> (accessed 5.24.20).
- Werner-Seidler, A., Perry, Y., CEAR, A.L., Newby, J.M., Christensen, H., 2017. School-based depression and anxiety prevention programs for young people: A systematic review and meta-analysis. *Clin. Psychol. Rev.* 51, 30–47. <https://doi.org/10.1016/j.cpr.2016.10.005>
- Westhorp, G., 2012. Using complexity-consistent theory for evaluating complex systems: Evaluation. <https://doi.org/10.1177/1356389012460963>
- Whear, R., Thompson-Coon, J., Boddy, K., Ford, T., Racey, D., Stein, K., 2013. The effect of teacher-led interventions on social and emotional behaviour in primary school children: a systematic review. *Br. Educ. Res. J.* 39, 383–420. <https://doi.org/10.1080/01411926.2011.650680>
- White, A., Bushin, N., Carpena-Méndez, F., Laoire, C.N., 2010. Using visual methodologies to explore contemporary Irish childhoods: *Qual. Res.* <https://doi.org/10.1177/1468794109356735>
- Wigelsworth, M., Lendrum, A., Oldfield, J., Scott, A., Bokkel, I. ten, Tate, K., Emery, C., 2016. The impact of trial stage, developer involvement and international transferability on universal social and emotional learning programme outcomes: a meta-analysis. *Camb. J. Educ.* 46, 347–376. <https://doi.org/10.1080/0305764X.2016.1195791>
- Wilson, S.J., Lipsey, M.W., 2007. School-Based Interventions for Aggressive and Disruptive Behavior: Update of a Meta-Analysis. *Am. J. Prev. Med.* 33, S130–S143. <https://doi.org/10.1016/j.amepre.2007.04.011>
- Wood, P., Warin, J., 2014. Social and emotional aspects of learning: Complementing, compensating and countering parental practices. *Br. Educ. Res. J.* 40, 937–951. <https://doi.org/10.1002/berj.3122>
- World Health Organisation, 1986. WHO | The Ottawa Charter for Health Promotion. World Health Organisation.

- World Health Organisation, WHO Global School Health Initiative, 1996. Promoting health through schools (No. WHO/HPR/HEP/96.4). World Health Organisation.
- Yin, R.K., 2009. Case study research: design and methods, 4th ed. SAGE, London, UK.
- Yin, R.K., 1994. Case study research: Design and methods, 2nd ed. SAGE, Thousand Oaks, CA, US.
- Zimmerman, B., Lindberg, C., Plsek, P., 1998. Edgware: Lessons from complexity science for health care leaders. VHA Inc., Dallas.
- Zins, J.E., Bloodworth, M.R., Weissberg, R.P., Walberg, H.J., 2007. The Scientific Base Linking Social and Emotional Learning to School Success. *J. Educ. Psychol. Consult.* 17, 191–210. <https://doi.org/10.1080/10474410701413145>